

## Infantile Paralysis Center Launched At Tuskegee

Ground Broken On Unit To Treat Disease, Conduct Research

TUSKEGEE, Ala. —(P)— Ground was broken at Tuskegee Institute today for an infantile paralysis center, planned for the double purpose of treating handicapped Negro children and to serve as a research and training base in a continuous battle against the disease.

The center, to be similar to a unit at Warm Springs, Ga., was made possible by a \$161,350 gift from the National Infantile Paralysis Foundation, New York. Peter J. Cusack, foundation secretary, came here to observe the exercises.

Dr. John W. Chenault, director of orthopedics at Tuskegee Institute, said today recent surveys of the incidence of infantile paralysis showed no appreciable variation between the white and Negro races.

In Alabama, 15 to 20 per cent of all crippling has been found due to the disease, and while no definite study has been made as to racial incidence Dr. Chenault said his studies had shown that 15.3 per cent of all crippled Negro children seen at Tuskegee Institute were victims of infantile paralysis.

From these figures, he added, it would seem there is no appreciable difference (among the races) in the incidence of the disease. A survey conducted in Georgia under WPA auspices showed corresponding percentages for both racial groups, and the figures were said by authorities here to be approximately the same as for Alabama.

In Northern states, although the incidence of infantile paralysis has been found to be considerably less than that for Alabama and Georgia, no racial differences have been found, the director said, adding that figures gathered over a three-year period at a Chicago hospital showed an incidence of 2.7 per cent among the orthopedic cases seen.

Dr. J. N. Baker, state health officer; Dr. J. B. Hobdy, of the State Department of Education, and Dr. A. W. Dumas, Natchez, Miss., president of the National Negro Medical Association, were among others here for the ground-breaking.

## Training to Treat Crippling Malady Aim at Tuskegee

*Mrs. Freeman*  
(The Associated Press)

Tuskegee, Ala., Jan. 12.—An infantile paralysis center, for which ground was broken here today, will be utilized as a clinic for training negro nurses and doctors throughout the United States in latest methods of treating the crippling disease.

Such was the primary purpose outlined by Peter J. Cusack, secretary of the National Infantile Paralysis Foundation of New York, which made possible the center through the gift of \$161,350.

Describing facilities for treating negroes as "definitely inadequate," Cusack said "the doctors and nurses trained here will return to their communities prepared to treat the disease."

The center, which will have a 30-bed plant for treatment of patients, is being built on the campus of Tuskegee Institute, world's largest institution of higher learning for negroes.

It will be somewhat similar to the Warm Springs, Ga., unit for treatment of whites, and will be under direction of Dr. John Chenault of Tuskegee, one of the nation's two negro orthopedic surgeons.

The project will be financed by the gift \$161,350 made available by the National Foundation. Basil O'Connor, president of the National Infantile Paralysis Foundation, New York City, and former law partner of President Franklin D. Roosevelt, came to Tuskegee last May and made the announcement of the gift and of the plan to erect the unit at Tuskegee, which will be constructed along the lines of a similar unit which has been erected at Warm Springs, Georgia.

# ERECTION OF CENTER BEGINS AT TUSKEGEE

TUSKEGEE INSTITUTE, Ala.—(SNS)—Dr. F. D. Patterson, president of Tuskegee Institute, announced yesterday that Peter J. Cusack, executive secretary of the National Infantile Paralysis Foundation, New York City, would come to the Institute to participate in the ground breaking exercises which will begin at 2:30 o'clock this afternoon, in connection with the erection of the Infantile Paralysis Center.

Others to appear on the program are J. B. Hobdy, Alabama State Department of Education; Dr. Murray Smith, Health Officer, Tuskegee, Macon County, Alabama; Dr. John A. Kenny, Medical Director of the John A. Andrew Memorial Hospital, Tuskegee Institute, who in addition to his duties as Medical Director at the Institute, served as the personal physician to Booker T. Washington; Dr. J. N. Baker, Alabama State Health Officer, Montgomery; Dr. John W. Chenault, Director of Orthopedics at Tuskegee Institute and Dr. A. W. Dumas, President of the National Negro Medical Association, Natchez, Miss. The devotions will be conducted by the Rev. Harry V. Richardson, Tuskegee chaplain.

The Infantile Paralysis Centre will be erected on the campus near the site of the John A. Andrew Memorial Hospital and when complete will consist of a thirty-bed unit for infantile paralysis research and for the training of Negro nurses, physical therapists and doctors. The unit will be modern in every detail and will be thoroughly equipped for the care and treatment of those who are victims of this disease.

The project will be financed by the gift \$161,350 made available by the National Foundation.

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Birmingham, Ala. News  
December 26, 1940

## Every Convenience Is Found At New Jefferson Hospital

The Jefferson Hospital, according to county officials and professional men of Birmingham, boasts countless features that cannot be found outside of the best medical institutions in the country.

Because the hospital will be perhaps the finest in the Southeast, citizens from throughout North Alabama are urged by officials not to fail to inspect the building either Saturday or Sunday.

The hospital will be open from 9 a.m. to 9 p.m. Saturday and the public also may inspect the building in connection with the dedication ceremonies at 2 p.m. Sunday afternoon.

Claim that the hospital soon to be opened ranks near the top, is based on the fact that best features of other leading institutions have been incorporated in the local building. Inspection trips were made by Architect Charles H. McCauley and members of the hospital building committee headed by James C. Lee. Data gleaned at other hospitals was worked into the plans for Birmingham's institution, including arrangement, design and equipment. Doctors, too, were consulted.

Total cost of the PWA-financed building is \$2,250,000 and of this amount \$300,000 has been poured into furnishings in an effort to keep the equipment on the same high standard that had been followed in actual construction, officials said. The building, fireproof throughout, has been furnished with the most modern medical and surgical equipment.

In keeping with a PWA regulation, the materials and equipment used are American-made throughout.

In the spacious lobby and recep-

tion area on the first floor, the walls are of marble and paneled walnut. The floors are of marble terrazzo covered with rugs, all illuminated by indirect lighting from above.

The remainder of the first floor houses the administration offices, emergency rooms, admitting rooms for white and Negroes, and kitchens equipped to serve 6,000 meals per day. In keeping with the colonial Georgian style of architecture used on the exterior, a directors' room on the first floor has been copied almost in entirety from one at Mount Vernon.

On the second floor is the dining room for the hospital staff, where meals are served cafeteria style.

The fifth floor is exclusively for maternity patients, either in private rooms or in wards, as desired by the patient.

The seventh floor is the most complete of its kind in the state. Here are housed the 11 operating rooms for major and minor surgery, with the largest room having an observation or viewing balcony. Each two operating rooms are a complete air conditioned unit with sterilizer room and doctors' wash room between. The x-ray department, which will permit the practice of deep therapy, radiography and fluoroscopy on the entire south wing of this floor, is said to be second to none in the South. The north wing houses the laboratories which are equipped to handle all kinds of laboratory work in connection with a hospital.

The twelfth floor provides space for approximately 50 patients in private rooms and four bed wards, with the floor divided into four sections for the further isolation of contagious diseases.

perintendent can tell when a nurse is receiving too many calls and relief can be sent this nurse while she is busiest. Different sets of nurses serve patients in wards and private rooms.

There also is an audible call system for staff members and personnel. It's of the "Calling Dr. Kildare" pattern seen in the movies.

The building will be heated with three steam boilers, fully automatic fired, of 750 horsepower, or enough to heat the entire block on which the institution is situated.

Another feature of the basement equipment is a modern incinerator or destructor, used to dispose of all hospital waste.

Every convenience is found at New Jefferson Hospital.

There are sun parlors on almost every floor, and also waiting rooms for the families of patients at times when they are not permitted at the bedside.

Call bells from various rooms register at the nurses' stations and also in the office of the superintendent or of the nurse in charge of the ward.

Material to help shine into the eyes of a patient, with portable lighting being used almost exclusively.

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Others to appear on the program are J. B. Hobdy, Alabama Department of Education; Dr. Murray Smith, Tuskegee, Ala.; Dr. John A. Macdonald, Tuskegee, Ala.; Dr. John A. Macdonald, Tuskegee, Ala.; Dr. John A. Macdonald, Tuskegee, Ala.

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Inspection trips were made by Architect Charles H. McCauley and other members of the hospital building committee headed by James C. Lee. Data gleaned at other hospitals was worked into the plans for Birmingham's institution, including arrangement, design and equipment. Doctors, too, were consulted.

Total cost of the PWA-financed building is \$2,250,000 and of this amount \$300,000 has been poured in to furnishings in an effort to keep copy on the same high this floor, is said to be second to standard that had been followed in none in the South. The north wing actual construction, officials said, houses the laboratories which are modern medical and surgical equipment.

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The twelfth floor provides space for approximately 50 patients in private rooms and four bed wards, with the floor divided into four sections for the further isolation of contagious diseases.

Living quarters for 150 nurses and 25 internes and resident doctors are contained on the fifteenth and sixteenth floors. The ends of these floors are made into open air porches for use of the residents of these floors only.

Five high-speed automatic elevators divided into two banks serve the upper floors. They open on a separate lobby on each floor.

Flooring also is of a resilient,

# Infantile Paralysis Center Begun



*Henry Wares*  
Edward J. Cusack, executive secretary of the National Infantile Paralysis Foundation, New York, is shown as he broke ground for the erection of the \$161,350 infantile paralysis center at Tuskegee Institute. Others shown in the picture are I to r Dr. I. A. Kenney, medical director, and Dr. F. D. Patterson, president, Tuskegee Institute; Dr. A. W. Dumas, Jr., president, National Medical Association, Natchez, Miss., and Dr. John W. Chenault, director of orthopedics, who will have charge of the center. Work on the structure started immediately with students in the mechanical department of the institute largely employed in the construction.

## PROCEED WITH NEW BUILDING AT TUSKEGEE

Occasion Is Milestone in  
Advancement of Health  
Program

TUSKEGEE INSTITUTE  
—Ground was broken here Friday, January 12, by Peter Cusack, New York City, and work will start immediately on the erection of infantile paralysis center made possible by a grant of \$161,350 by the National Infantile Paralysis Foundation.

Mr. Cusack, executive secretary of the National Foundation, said the unit would be used for the treatment of handicapped Negro children and would serve also as a research and training center for

nurses, physical therapists and doctors. With knowledge gained at the Tuskegee polioyelitis center these trained workers would be able to return to their communities and wage a continuous battle against the disease, the speaker declared.

Prior to the ground breaking exercises, the indoor program included brief addresses by Dr. F. D. Patterson, President, Tuskegee Institute, who presided; Dr. John A. Kenney, Medical Director, and Dr. John W. Chenault, Director of Orthopedics, Tuskegee Institute; Mr. J. B. Hobdy, State Department of Education and Dr. J. N. Baker, State Health Officer, Montgomery, and Dr. A. W. Dumas, President of the National Negro Medical Association, Natchez, Miss.

Dr. Patterson said: "I regard this occasion as a significant milestone in the advancement and achievement of the health work of the institute and a notable effort on behalf of the Negro people of America." Dr. Patterson paid tribute to the Rosenwald Fund, Dr. M. O. Bousefield, of the Rosenwald Foundation; Basil O'Conner, Director of the Infantile Paralysis Foundation, New York city; to the County and State Welfare and Health Officials for their interest and cooperation in getting the unit started at Tuskegee.

Dr. Baker and Mr. Hobdy lauded the health program of the institute and said the accomplishments of the various health services rendered by Tuskegee had far-reaching effect on the State. Dr. Baker said the State Health Department is intensely interested in an institution in Alabama where public health nurses could be trained and that no better place could be found than Tuskegee.

Dr. John A. Kenney, Medical Director, Tuskegee Institute, and personal physician to Booker T. Washington, traced the medical development of the institute from 1902, when typhoid, malaria, smallpox, pellagra and open tuberculosis were prevalent, to the present when with modern sewerage disposal systems and with the advancement of medical science, together with the operation of county, state and federal health agencies, all of these diseases had been greatly reduced, the speaker declared.

Dr. Dumas pledged the united support of the National Negro Medical Association for the continuance of the new project, and said "with the consummation of this project, a great national emergency has been met."

Mr. Cusack was of the opinion that the establishment of the unit at Tuskegee Institute was the wisest step that could have been made and that the center was safe under the direction of Dr. John W. Chenault, Director of Orthopedics, one of the nation's two Negro Orthopedists, and as a part of the vitally important health program of Tuskegee Institute.

The Infantile Paralysis Center will be erected on the institute campus near the site of the John A. Andrew Memorial hospital and when completed will consist of a 30 bed unit for infantile paralysis treatment and research and will be modern in every detail with an adequately trained staff. Work will start on the structure immediately and students in the Mechanical Department of the institute will be largely employed in the construction.

Institution Also Intended  
For Training Doctors,  
Therapists, Nurses

TUSKEGEE INSTITUTE  
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FUND GRANT OF  
\$161,350 GETS  
PROJECT GOING

Greenwood & C. Index-Journal  
January 12, 1940

## Infantile Paralysis Took Big Jump During Summer of 1939; This State Was Aided During Recent Epidemic

Four times as many cases of infantile paralysis were reported during the summer of 1939 as there were during the same period of the preceding year, it was announced by Basil O'Connor, president of the National Foundation for Infantile Paralysis, New York.

Nearly 7,000 cases were recorded during the first 47 weeks of the year, as against 1700 for the whole country in 1938.

At the same time, the National Foundation's annual report showed that 44 grants totaling \$463,972 were made in 1938 and 1939 to universities, hospitals, and other institutions in 21 states to combat the disease.

While more than \$130,000 of this went for research to "trap" the virus responsible for the disease, there also were grants for experiment with treatment amounting to \$284,880 besides aid in a major epidemic.

### State Received Aid

South Carolina received special aid in the South, an account of the epidemic during the early summer.

The state was granted \$7,650 which was matched from the Social Security program of the Federal government. The funds, totaling \$15,300, were used to employ five orthopedic nursing consultants and two physiotherapy technicians, besides paying fees of examining surgeons and pediatricians, hospitalization of approximately 100 children for 30 days, and convalescent and foster home care of approximately 22 children. Orthopedic appliances were furnished in some instances.

A research grant of \$5,000 also was made to the Shriners' hospital for crippled children at Greenville, S. C.

The purpose of this grant, as explained in the report, is: "To conduct research on the effect of polio-

myelitis on the length of legs and the treatment of leg-length discrepancies; to study the equalization of leg-length discrepancies; to investigate disturbances of bone growth in an effort to determine the early and late effects on such growth following poliomyelitis."

### Negroes Helped

Negroes in the South were the recipients of a grant of \$161,350, made to Tuskegee Institute in Alabama. The purpose is given as:

"For construction, equipment, and maintenance for one year of a 36-bed unit for the care and after-treatment of negro orthopedic cases. Further, Tuskegee will serve as a center for the training of negro physicians, nurses, and physical therapists in orthopedic work and will disseminate educational information to all negro doctors with respect to early diagnosis and after care and treatment of orthopedic cases."

Funds by the National Foundation are raised annually through voluntary contributions made through the Committee for the Celebration of the President's Birthday. The campaign is now in progress and will continue through January 30, birthday of President Roosevelt. Organizations are being set up in each county of every state. Included in the drive will be various parties celebrating the President's birthday, a March of Dimes, a March of Sport, and birthday greeting cards to the President, with dimes attached.

Half of all funds collected go to the National Foundation and half to local chapters in each county. Last year's drive netted \$1,327,173, of which \$600,000 went to the National Foundation and \$727,173 to the counties. An additional \$50,000 from the Will Rogers Memorial Commission also was left with the counties.

Albany Ga. Herald  
January 12, 1940

## Ground Broken For Polio Center At Tuskegee

### Will Treat Handicapped Negro Children and Conduct Research Work.

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The center, to be similar to a unit at Warm Springs, Ga., was made possible by a \$161,350 gift from the National Infantile Paralysis Foundation, New York. Peter J. Cusack, Foundation secretary, came here for the exercises.

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In Alabama, 15 to 20 per cent of all crippling has been found due to the disease, and, while no definite study has been made as to racial incidence, Doctor Chenault said his studies had shown that 15.3 per cent of all crippled Negro children seen at Tuskegee Institute were victims of infantile paralysis.

From these figures, he added, it would seem that there is no appreciable difference (among the races) in the incidence of the disease. A survey conducted in Georgia under Works Progress Administration auspices showed corresponding percentages for both racial groups, and the figures were said by authorities here to be approximately the same as for Alabama.

In Northern states, although the incidence of infantile paralysis has been found to be considerably less than that for Alabama and Georgia, no racial differences have been found, the director said, adding that figures gathered over a three-year period at a Chicago hospital showed an incidence of 2.7 per cent among the orthopedic cases seen.

Dr. J. N. Baker, state health officer; Dr. J. B. Hobdy, of the state Department of Education, and Dr. A. W. Dumas, of Natchez, Miss., president of the National Negro Medical Association, were among others here for the ground-breaking.

Dothan, Ala. Eagle  
January 12, 1940

## GROUND IS BROKEN AT TUSKEGEE FOR PARALYSIS CENTER

### Treating of Handicapped Negroes and Research And Training Base Aim

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Orlando, Fla., Morning Sentinel  
January 13, 1940

## Tuskegee Breaks Ground For Infantile Hospital

TUSKEGEE (AP). An infantile paralysis center, for which ground was broken here yesterday, will be utilized as a clinic for training negro nurses and doctors throughout the United States. Peter J. Cusack, secretary of the National Infantile Paralysis Foundation of New York which made possible the center through the gift of \$161,350 outlined this as the primary purpose.

The center, which will have a 30-bed plant for treatment of patients, is being built on the campus of Tuskegee Institute, world's largest institution of higher learning for negroes.

York, S. C., Yorkville Enquirer  
January 15, 1940

The primary purpose of an infantile paralysis center now being built at Tuskegee Institute in Alabama, will be clinical training of negro doctors and nurses in the latest methods of treating the disease.

Clarksville, Tenn., Leaf-Chronic  
April 18, 1940

### Tuskegee Gets "Polio" Fund

TUSKEGEE, ALA. (AP).—An infantile paralysis center is being erected at Tuskegee Institute, financed by a gift of \$161,350 from the National Infantile Paralysis Foundation.

# Tuskegee Architect Praised for Drawing \$121,000 Polio Hospital

TUSKEGEE INSTITUTE, Ala. (ANP)—Louis E. Fry, 37, head of the department of architecture at Tuskegee Institute, has won high praise from the architectural consultant of the National Foundation for Infantile Paralysis for his drawings and specifications for the \$121,000 infantile paralysis hospital under construction here with a \$161,000 grant from the foundation.

This hospital, only institution of its kind for colored in the nation, will be Mr. Fry's fourth major work as principal executive architect since coming here in September, 1935.

Since then he has designed and supervised the construction of the new gymnasium in 1938 at Alabama State Teachers' college, Montgomery, at a cost of \$125,000; the science and health education building there in 1939 costing \$89,000 and the \$50,000 Extension Service building here erected last year.

## FORMERLY AT HOWARD

Mr. Fry had designed, made drawings for and assisted in supervising the construction of important educational buildings in Prairie View, Tex., and Washington before his affiliation with Tuskegee.

The \$10,000 women's dormitory, \$100,000 hospital and two units of the faculty housing of Prairie View College are his work accomplished in 1928-29, while teaching drawing and engineering at the Texas institution.

From 1930 to 1935 he was draftsman, designer and chief draftsman in the office of Albert I. Cassell, Washington architect.

There he made renderings and drawings for three women's dormitories at Howard built for \$750,000 in 1931, the \$460,000 chemistry building built in 1936, the \$500,000 power plant erected that same year; the \$460,000 educational classroom building constructed in 1933, the \$1,000,000 Founders' library built in 1937, and the \$160,000 Odd Fellows building which went up in 1933.

A native of Bastrop, Texas, he finished Prairie View in 1922, and then attended Kansas State College where he took his bachelor's degree in architectural engineering in 1927, after winning all scholastic honors available and being

selected at that school to Phi Beta Kappa, national honorary society.

His M.S. in architecture was received in 1930 from Kansas State after teaching at Prairie View.

Since being at Tuskegee, Mr. Fry has also carried on special research in rural housing under a grant from the General Education Board for 1937-38. His efforts along this line met with favorable reaction and led to the appointment by the Alabama extension service of a housing demonstrator for work among colored.

## TUSKEGEE CLINIC ATTRACTED BEST DOCTORS IN NATION

TUSKEGEE INSTITUTE, Ala.—The John A. Andrew Clinical Society closed one of the most successful sessions since the date of organization, "for the advancement of Negro physicians and surgeons in the science and art of medicine and surgery and of the study and treatment of morbid conditions affecting thousands of needy sufferers in this section of the South."

Dr. John A. Andrew, medical director of the John A. Andrew Hospital, and secretary-treasurer of the Clinical Society, said "the physicians and surgeons showed an interest in the work of the organization and an eagerness to advance their knowledge in the various branches of medicine and surgery that is unparalleled anywhere in the country." Many of the outstanding physicians and surgeon-legion posts, D. A. V. and V. T. W. in America were in attendance and gave lectures daily and participated in discussions embracing virtually all fields of medicine and surgery.

Patients from all sections of the South came for medical attention. Operations began as early as 6:00 o'clock in the morning and continued until late in the evening with three or four tables constantly in use. A constant stream of patients poured through the corridors and clinic rooms and many stood outside awaiting an opportunity for consultation or treatment. Most of the cases treated were persons in dire need who would not have been able to obtain such careful and skillful attention elsewhere. Approximately one hundred patients received surgical at-

tention and more than five hundred were treated for various diseases and ailments.

One of the most important features of the clinic was a round-table discussion with many of the leading physicians and surgeons participating, on the shortage of Negro physicians and the need of Internes and Resident Physicians in hospital. Dr. A. W. Dumas, President of the National Medical Association, who spoke on Tuesday afternoon, said one solution of the problem would be the establishment of an additional medical school and pointed out that New Orleans, because of the excellent hospital facilities and the availability of physicians from Tulane University and Louisiana State University for instructional purpose, would be an ideal site for the location of such a school.

"This subject is one of far-reaching importance to the medical profession," said Dr. Dumas, "and some definite and medical education of our young men and women." A committee was named to study all phases of the subject and to recommend the menu.

## Laud Race Men For Work At U.S. Veteran Hospitals

MEMPHIS, Tenn.—(SNS)—Dr. Eugene Dibble, head of the United States Veterans Facilities, Tuskegee, Alabama, was one of the most outstanding record in direction and supervision during a two-day session of officials of U.S. Veterans hospitals, legion posts, D. A. V. and V. T. W. in America were in attendance and at Peabody Hotel Monday and Saturday of last week.

Representatives from thirteen states which comprise the Ninth Area were in attendance and discussed rehabilitation work among veterans, including veterans relief, compensation, hospitalization and pension. This meeting was the result of national protests against federal laws interpreted as impeding rehabilitation work among the veterans.

Other race representatives present at the session were Dr. Branche clinical director and Mr. Patterson contact officer at the U. S. Veterans Hospital Tuskegee. Mr. Patterson was also lauded as one of the most informed men in social work among U. S. Veterans.

Dr. R. Q. Venson local dentist

and District Commander of the American Legion Department of Tennessee only colored ex-service men holding such a position was also in attendance.

Recommendations were made for changes in the present Berean law affecting the granting of pensions and compensation to permanently disabled veterans, Dr. Venson stated.

Dr. Venson added that colored employees under W. Alonzo Locke, head waiter and Phillip Booth, captain, showed race representatives at Peabody every possible courtesy, preparing them a tasty menu.

Birmingham, Ala. News  
December 27, 1940

## Visitors Voice High Praise Of New Jefferson Hospital

### Members Of Medical Profession Are Surprised And Amazed At Facilities During Open House

Surprise and amazement at the facilities offered in the new Jefferson Hospital were expressed by more than 300 persons who visited the new \$2,250,000 institution Thursday, the first day of a five-day open house program. Thursday and Friday were set aside as visiting days for the medical profession exclusively. Saturday and Sunday the general public has been invited to inspect the hospital and attend the dedication ceremonies starting at 2 p.m. On Monday the hospital will be open for inspection by Negroes.

Dr. Charles H. Young, acting administrator of the hospital, said approximately 150 of Thursday's vis-

itors registered, and approximately that number did not leave their names. Of the estimated 300 visitors, there were 125 doctors and the remainder were nurses and members of doctors' families.

"The doctors were surprised and amazed at the equipment of the hospital throughout, but especially that of the 11 operating rooms and the maternity section," Dr. Young said. "They thought the equipment very complete, and many said they had seen nothing like it in any hospital they had visited."

"The women visitors, quite naturally, were impressed with our fine kitchens, which can serve a total of 6,000 meals daily."

## HOSPITALS- 1940

Montgomery Ala. Advertiser  
January 22, 1940

### A CHANCE FOR A CITY HOSPITAL

Montgomery needs a city hospital. It has needed one for many years for both black and white charity and semi-charity cases. Three agencies in the city now do the best they can to provide for those types of hospital cases. They are St. Margaret's Hospital, The City of St. Jude, and the Montgomery Hospitalization Committee. The latter agency merely provides funds and acts as a clearing house for free medical service. It must seek beds for its patients and equipment for treatment and diagnosis at hospitals.

These three agencies are inadequate. Upon the creation of the Hospitalization Committee three years ago the extent of their inadequacy was made very plain. As the committee has developed its field, an accurate picture of the need has been reflected by the work it has handled and the work it has been forced to refuse because of lack of funds or hospital facilities.

A city hospital, built and equipped to handle a case load of 100 patients in bed, would cost about \$200,000. Running the hospital would cost between fifty and seventy-five thousand dollars a year. Those are big sums. Heretofore Montgomery's city officials have declined to consider such a project because of the cost.

A bill now comes before the present congress which would provide funds for hospitals in areas which need them but cannot afford them. Montgomery qualifies in that regard. The hospitals will be constructed on a uniform plan and will cost \$150,000 each. This will be a considerable saving because of the number to be constructed. Under the terms of the bill, it would be possible for two of them to be placed in Alabama.

Mobile already has a city hospital. Jefferson county also has public medical facilities. The two points in the areas of greatest need in Alabama are Montgomery and Huntsville.

There are other qualifications which must be met to obtain these hospitals under the terms of the bill now pending. The site must be provided by the city. Assurance must be given that operating expenses can be met on an adequate scale. An acceptable method of governing the affairs of the hospital must be devised and properly safeguarded.

It behooves Montgomery to act now to get ready to take advantage of the opportunity

if it materializes. The bill has a good chance of passage and many areas have already made plans to ask for the hospitals.

Dr. Clarence Weil, who has often raised an authoritative voice calling for a city hospital and has been active in attempts to get one, has pointed out that funds to operate the hospital can be obtained. The Hospitalization Committee could be merged with the project and its \$5,000 annual appropriation from the Unified Drive put into the till. The Junior League could contribute almost the same amount in return for being allowed to use the hospital facilities for its clinics. St. Margaret's Hospital could provide an annual sum between \$15,000 and \$25,000, the amount it now spends on charity patients who could be handled at the city hospital. St. Jude would contribute substantially for Negro patients. The City of Montgomery could make up the rest. The medical society could muster a tremendous amount of free medical services at such a hospital, services it cannot now render because of lack of facilities.

The operating problem can be solved. The management problem can also be solved.

It is important that the management of the hospital be kept free of political complications because the terms of the bill which would provide these hospitals include a clause protecting the interests of the federal government. The title to the property would remain in the hands of the federal government. In event of mismanagement or inadequate operating funds, the hospital would be returned to the U. S. Public Health Service for use as a veteran's facility or otherwise as it might see fit.

The medical society already has the machinery at hand for providing such a non-political management. A governing board of four doctors selected by the society and two business men selected by the city for staggered terms would be a proper organization. The chairman of the governing board would be the paid director of the hospital.

This subject can be argued with statistics or sentimental terms. The helpless poor who remain poor and unproductive because of illness arouse sympathy. They should also arouse resentment, resentment because no agency of common effort restores them to economic productivity. Every case of illness unattended is also a case for robbery. The victims of the robbery are merchants and their workers whose goods would be bought if the worker were able to work.

The citizens of Montgomery have it with-

## ALABAMA

in their power to demand that proper effort be made to get in line for the hospital which probably will be made available. The leadership of the medical profession is anxious for the project. The project is sorely needed. It only remains for the public voice to be raised in the authoritative manner that only a democracy allows.

## ANDREW CLINIC UNITS TO MEET AT TUSKEGEE

29th Annual Session Set  
For April 7 To 13  
At Institute

TUSKEGEE INSTITUTE, Ala., March 15—The twenty-ninth annual clinic of the John A. Andrew Memorial hospital and the twenty-second annual meeting of the John A. Andrew Clinical society will be held at Tuskegee institute the week of April 7 through 13, it was announced this week by Dr. John A. Kenney, medical director.

Particular attention will be paid during the session to discussions centering on new treatments for diseases and on the latest and most improved methods in operation and post-operative treatments.

A partial program released by Dr. Kenney includes two hours a day for special clinical practice instruction in the various branches of medicine; five hours a day to operative surgery; one-half day at the United State Veterans Administration Facility, Tuskegee, Ala.; one session to a round-table discussion on the shortage of doctors, with special reference to internes and residents, which will be led by Dr. M. O. Bousfield, Chicago.

Public health meetings will be conducted by Dr. R. T. Adair, president of the John A. Andrew Clinical society, Montgomery; Dr. D. W. Byrd will speak on "Some Ob-

servations on the blood test for Syphilis;" Dr. R. A. Vonderlehr, assistant surgeon general, United State Public Health Service, Washington, D.C., will discuss "The Increasing Opportunities for the Clinician in Public Health Work."

A representative from the dental profession and Dr. F. D. Patterson, president, Tuskegee institute, will speak at a joint session of the physicians and dentists. Out-patient clinics and various special clinics will be held daily.

Nashville, Tenn. Press-Scimitar  
April 10, 1940

### Tuskegee Gets 'Polio' Fund

Tuskegee, Ala.—(AP)—An infantile paralysis center is being erected at Tuskegee Institute, financed by a gift of \$161,350 from the National Infantile Paralysis Foundation.

## Chenault To Buy Equipment For Paralysis Center



TUSKEGEE INSTITUTE, Ala.—(SNS)—Dr. John W. Chenault, Director of Orthopedics at the John A. Andrew Memorial Hospital, left the Institute Saturday morning for Chicago, where he has gone to purchase equipment for the Infan-

tile Paralysis Center which is now under construction on the Institute campus. Ground was broken for this unit by Peter J. Cusack, executive secretary of the National Foundation in January and work was started immediately.

The center was made possible by a grant of \$161,350 by the National Infantile Paralysis Foundation and the building when completed will be used for the treatment of handicapped Negro children and will also serve as a research and training center for nurses, physical therapists and doctors. Speaking at the ground-breaking exercises, Dr. Patterson said: "I regard this occasion as a significant milestone in the advancement and achievement of the health work of the Institute and a notable effort on behalf of the Negro people of America." He paid a tribute to various health agencies for their interest and cooperation in getting the unit started at Tuskegee Institute.

# Andrew Clinical Society In 23rd Annual Meeting

Leaders In  
Medical Field  
Are Etc

**TUSKEGEE.**— NP) th more  
han 150 medical men attend-  
ance at the John A. Andrew Clinic,  
which begins here Sunday, physi-  
cians from every section of the  
country were expected. This, the  
twenty-third annual session, to be  
held in the successful clinic in the  
history of the organization.  
As a special tribute to Dr. John  
A. Kenny, one of the founders of  
the clinic, who returned to Tuske-  
gee after an absence of a score of  
years to resume the position of  
secretary-treasurer, men prominent  
in the medical world made a spe-  
cial effort to attend. Chicago's  
Provident hospital sent a Pullman  
load of doctors, many of whom serv-  
ed as lecturers and specialists.  
Among them were:

Ulysses G. Dailey, Spencer C.  
Dickerson, Roscoe Giles, Ralph  
Scull, Walter S. Grant, Clarence  
H. Payne, John W. Lawlah, Car-  
l. Roberts, B. W. Anthony, T. M.  
Smith, W. M. Jones and Leonida  
H. Berry.

Clinics in various phases of med-  
icine are to be held with discus-  
sions, authoritative speakers and  
demonstrations. Sessions are to be  
held in the main and clinical au-  
ditorium.  
The following are the clinics:  
diagnostic, eye, nose and throat, clin-  
ical, neurological, neuro-psychiatric,  
dermatological, cardiac, orthopedic,  
obstetrical, pediatric, and roent-  
genological.

To be seen during the week's  
program will be the following out-  
standing medical personalities: T.  
K. Lawless, brilliant dermatologist  
and lecturer at Northwestern uni-  
versity, Chicago; Trygve Gunder-  
son, eye specialist, Boston; Walter  
Gray Crump, surgeon, New York;  
and W. A. Young, supervisor of  
cardiology, St. Louis.

The John A. Andrew Clinical  
Society, organized in April, 1918,  
annually brings together physicians  
and surgeons in the interest of

science and art in medicine and  
surgery, and for the study and  
treatment of morbid conditions af-  
fecting thousands of needy suffer-  
ers in this section of the South.

Officers are: R. T. Adair, Mont-  
gomery, president; S. M. Clark,  
Knoxville, vice-president; John A.  
Kenney, Tuskegee institute, secre-  
tary-treasurer, and A. B. McKen-  
zie, Tuscaloosa, general supervisor  
of clinics.

## Dedicate Lone Alabama

**T-B Race Hospital**  
BIRMINGHAM, Ala. — (ANP) — With  
many persons of both races in at-  
tendance and on program, dedica-  
tion was held Saturday of the state's  
modern new tuberculosis sanita-  
rium, the lone institution of its kind  
operated in Alabama for Negroes  
exclusively.

## Dedicate Lone Alabama T-B Hospital For Negroes

**OCT 5 1940**  
BIRMINGHAM, Ala. — (ANP)  
With many persons of both races  
in attendance and on program, ded-  
ication was held Saturday after-  
noon of the state's modern new  
tuberculosis sanitarium, the lone  
institution of its kind operated in  
Alabama for Negroes exclusively.

Speakers included Commissioner  
James W. Morgan, Dr. James L.  
Brakefield, president of the Ala-  
bama Tuberculosis association; Dr.  
J. D. Dowling, city health officer;  
Dr. A. Bell Ballard, director of  
Waverly Hills sanitarium, Louis-  
ville; Dr. H. C. Bryant and County  
Commissioner Earl Bruner.

The Birmingham Health Associ-  
ation, an organization of Negroes  
who are leading a fight against the  
disease, had charge of the pro-  
gram.

Birmingham, Ala. Are Herein  
December 27, 1940

## NEW HOSPITAL OFFERS STREAMLINED SERVICES

The Jefferson Hospital, according to county officials and profes-  
sional men of Birmingham, boasts countless features that cannot be  
found outside of the best medical institutions in the country.

Because the hospital will be perhaps the finest in the Southeast,  
citizens from throughout North Alabama are urged by officials not  
to fail to inspect the building either Saturday or Sunday.

The hospital will be open from 9  
a.m. to 9 p.m. Saturday and the  
public also may inspect the building  
in connection with the dedication  
ceremonies at 2 p.m. Sunday after-  
noon.

Claim that the hospital soon to be  
opened ranks near the top, is based  
on the fact that best features of  
other leading institutions have been  
incorporated in the local building.  
Inspection trips were made by Ar-  
chitect Charles H. McCauley and  
members of the hospital building  
committee headed by James C. Lee.  
Data gleaned at other hospitals was  
worked into the plans for Birming-  
ham's institution, including arrange-  
ment, design and equipment. Doc-  
tors, too, were consulted.

Total cost of the PWA-financed  
building is \$2,250,000 and of this  
amount \$300,000 has been poured in-  
to furnishings in an effort to keep  
the equipment on the same high  
standard that had been followed in  
actual construction, officials said.  
The building, fireproof throughout,  
has been furnished with the most  
modern medical and surgical equip-  
ment.

In keeping with a PWA regula-  
tion, the materials and equipment  
used are American-made through-  
out.

In the spacious lobby and recep-  
tion area on the first floor, the walls  
are of marble and paneled walnut.  
The floors are of marble terrazzo  
covered with rugs, all illuminated  
by indirect lighting from above.

The remainder of the first floor  
houses the administration offices,  
emergency rooms, admitting rooms  
for white and Negroes, and kitchens  
equipped to serve 3,000 meals per  
day. In keeping with the colonial  
Georgian style of architecture used  
on the exterior, a directors' room on  
the first floor has been copied al-  
most in entirety from one at Mount  
Vernon.

On the second floor is the dining

when they are not permitted at  
the bedside.

Call bells from various rooms reg-  
ister at the nurses' stations and also  
at the office of the superintendent  
of nurses. In this manner, the su-  
perintendent can tell when a nurse  
is receiving too many calls and re-  
lief can be sent this nurse while  
she is busiest. Different sets of  
nurses serve patients in wards and  
private rooms.

There also is an audible call sys-  
tem for staff members and person-  
nel. It's of the "Calling Dr. Kil-  
dare" pattern seen in the movies.

The building will be heated with  
three steam boilers, fully automatic  
fired, of 750 horsepower, or enough  
to heat the entire block on which  
the institution is situated.

Another feature of basement  
equipment is a modern incinerator  
or destructor, used to dispose of  
all hospital waste.

The fifth floor is exclusively for  
maternity patients, either in private  
rooms or in wards, as desired by the  
patient.

The seventh floor is the most com-  
plete of its kind in the state. Here  
are housed the 11 operating rooms  
for major and minor surgery, with  
the largest room having an observa-  
tion or viewing balcony. Each two  
operating rooms are a complete air  
conditioned unit with sterilizer  
room and doctors' wash room be-  
tween. The x-ray department, which  
will permit the practice of deep  
therapy, radiography and fluoros-  
copy on the entire south wing of  
this floor, is said to be second to  
none in the South. The north wing  
houses the laboratories which are  
equipped to handle all kinds of  
laboratory work in connection with  
a hospital.

The twelfth floor provides space  
for approximately 50 patients in  
private rooms and four bed wards,  
with the floor divided into four sec-  
tions for the further isolation of  
contagious diseases.

Living quarters for 150 nurses and  
25 internes and resident doctors are  
contained on the fifteenth and six-  
teenth floors. The ends of these  
floors are made into open air porches  
for use of the residents of these  
floors only.

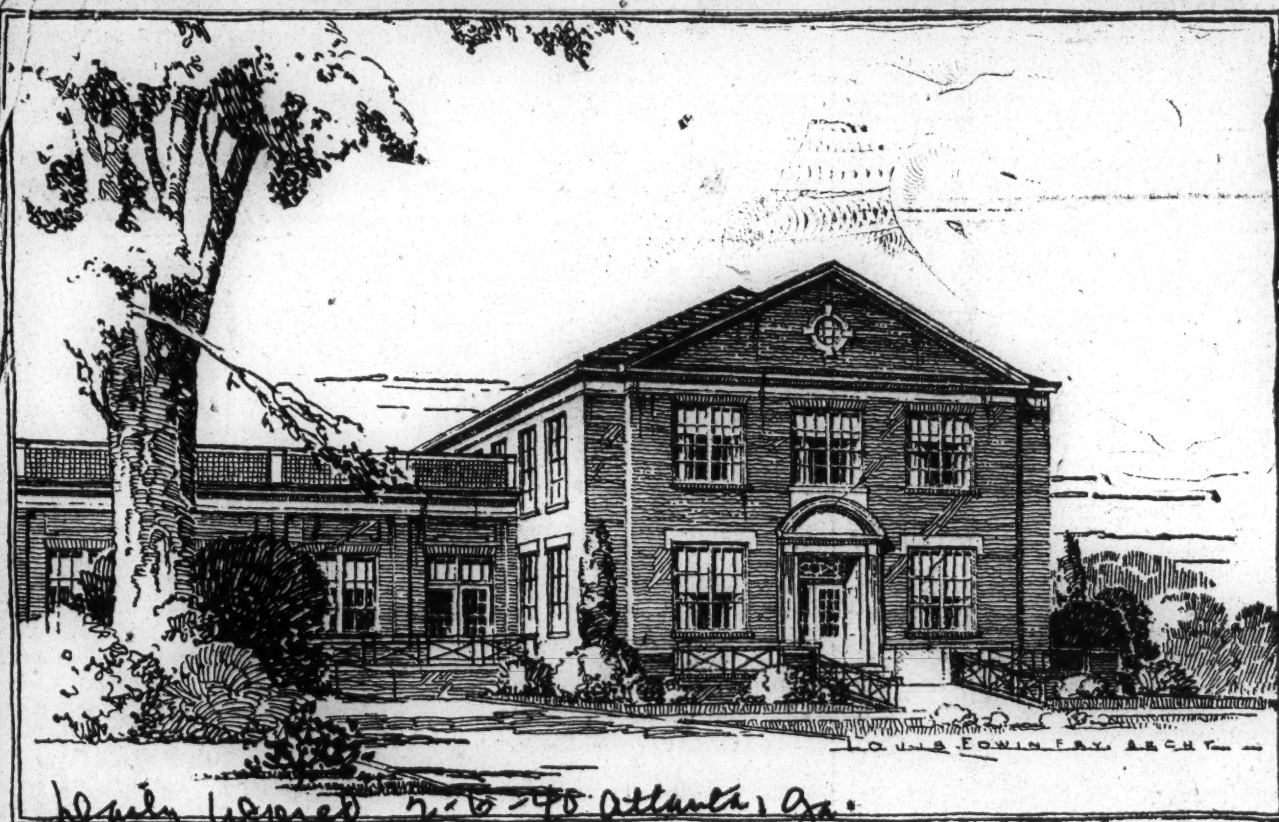
Five high-speed automatic eleva-  
tors divided into two banks serve  
the upper floors. They open on a  
separate lobby on each floor.

Flooring also is of a resilient,  
noise-reducing material to help  
eliminate noise. There are four  
stairways in the building and one  
of these constitutes a smoke-proof  
fire tower.

Many of the private rooms on  
the various floors, have private  
baths. Wards are divided into six-  
bed sections and each bed space can  
be transformed into a cubicle for  
privacy by the drawing of curtains.  
There are no overhead lights to  
shine into the eyes of a patient,  
with portable lighting being used  
almost exclusively.

There are sun parlors on almost  
every floor, and also waiting rooms  
for the families of patients at times

# Infantile Paralysis To Be Treated Here



**TUSKEGEE INSTITUTE, Ala.**—Architect's drawing of the Infantile Paralysis Unit which will be erected on the campus of Tuskegee Institute. On January 12 ground was broken for this structure by Mr. Peter J. Cusack, Executive Secretary of the National Infantile Paralysis Foundation, New York City.

Attending the ground-breaking exercises in addition to Mr. Cusack were Dr. F. D. Patterson, President, Tuskegee Institute, who presided; Dr. J. A. Baker, Alabama State Health Officer; Mr. J. D. Dr. J. A. Kenney, Medical Director, Tuskegee Institute; Dr. John W. Chenault, Director of Orthopedic

## Hospital Aid Sought In 16 Alabama Cities

### Baker Tells How New Federal Statute Works

Prominent citizens of 16 Alabama cities and towns have expressed a desire to obtain hospitals for those communities under the terms of the bill now awaiting action in Congress which provides for the construction of

hospitals and health centers by the Federal government in communities needing them but lacking the means to build them, Dr. J. N. Baker, State health officer, announced yesterday.

The 16 Alabama communities for which hospitals are desired, Dr. Baker revealed, were Montgomery, Decatur, Florence, Tuscaloosa, Gaylesville, Riderwood, Talladega, Monroeville, Geneva, Blue Springs, Aliceville, Fort Payne, Brewton, Athens, Haleyville and Demopolis.

The State health officer said in making the list public that he had just received a copy of the full text of the hospital construction bill and called attention to some provisions of the measure not heretofore mentioned in newspaper reports describing it.

"One of its heretofore unmentioned provisions is that the appropriation of

cs, Tuskegee Institute, who will have charge of the Unit; Dr. A. W. Dumas, President of the National Negro Medical Association, and Mrs. A. W. Dumas, President of the Women's Auxiliary, National Negro Medical Association, Natchez, Mississippi.

Work has started on the \$161,350 building, the funds for which were appropriated by the National Infantile Paralysis Foundation.

Students in the Mechanical Department of Tuskegee Institute will be employed in the construction of this building.

Works Agency will be authorized to expend these funds for the planning, execution, construction and equipment of the hospital, including administrative expenses, acquisition of site, preparation of working drawings and specifications, award of all necessary contracts, and supervision of construction. The use of the word "hospital" in the act is broad, and defined in the text as including "the physical facilities necessary for the prevention, diagnosis and treatment of disease, and for the protection of the public health."

Dr. Baker again emphasized that the Federal government's participation in the provision of hospitals under the proposed measure would be limited to their construction and equipment, leaving to the communities themselves the full responsibility of maintaining them.

\$10,000,000 which it carries shall cover the first fiscal year of operation only," he said. "It is provided that Congress shall later make available such sums as may be considered necessary for carrying out its purposes. Provision is also made for the establishment of a National Advisory Hospital Council, consisting of the surgeon general of the United States Public Health Service, as chairman, and six other members to be appointed by him with the approval of the Federal Security Administrator. Among the most important duties to be performed by this advisory council are the study of all applicants for hospitals received, recommendation of such projects as, in the opinion of its members, are needed, formulation of standards which may be necessary to insure proper conduct of the hospital; and the care of patients they are to serve; and the formulation of rules and regulations necessary to carry out the provisions of the act. Another heretofore unrevealed section provides for the training of personnel needed for the operation of the hospitals to be constructed under the terms of the measure. When a hospital project has been approved by the surgeon general in accordance with the provisions of the act, it will be certified by the Federal Security Administrator to the Federal Works Agency for construction and there will be allocated and transferred to the Federal Works Agency the funds declared available for the project. Then the Federal

# Break Ground For Infantile Paralysis Center At Tuskegee Inst.



EDWARD J. OUSACK, executive secretary of the National Infantile Paralysis Foundation, New York City, breaking ground for the erection of the infantile paralysis centre at Tuskegee Institute, Ala. Others shown in the picture, reading from left to right, are Dr. J. A. Kenney, medical director, and Dr. F. D. Patterson, president, Tuskegee Institute; Dr. A. W. Dumas, sr., president, National Negro Medical Association, Natchez, Miss., and Dr. John W. Chenault, director of Orthopedics, who will have charge of the centre at Tuskegee Institute. Work will start on the \$161,350 structure immediately and students in the Mechanical Department of the Institute will be largely employed in the construction. When completed the centre will in every detail and have a thirty-bed unit for infantile paralysis treatment and research.

## ON SEEING CRIPPLED CHILDREN THROUGH

The bright young women of the Junior League are now pressing the public to buy seals for the benefit of crippled children objects of their special care.

Before us is a copy of the organ of the Alabama Society for Crippled Children in which we find no end of readable, appealing reading matter. The editorial eye falls, for instance, upon this article:

From ancient times, society's attitude toward handicapped children has made their plight more difficult. But a change has been making itself felt within the last few decades, a change as far-reaching as that which transforms the cold of winter into the warm, nurturing world of spring. At this Easter time, so full of renewed promise and rebirth, it seems fitting that we should step out into the new world for cripples and examine the wonderful changes which have been wrought in the attitude toward the handicapped.

We find that society now "sees a crippled child through," realizing its responsibility to him as an equal, though crippled, member of the brotherhood of man.

We have learned that every penny spent for him pays untold dividends, not only to the child himself, but also to the community in which he lives. Truly such a transfiguration of human life is worthy of our support.

Through the cooperation of an awakened public, the crippled child with crooked limbs can be given the expert attention of orthopedic surgeons, convalescent care, education, and vocational rehabilitation. What an opportunity there is for us at this Easter season to purchase a membership in the Alabama Society for Crippled Children and join with thousands of others in helping children overcome their physical handicaps!

Turning to another page of this novel publication we come upon this graphic statement of questions under the familiar heading, "Do You Know?" We quote:

"1. That the number of crippled children, under the age of 21, in each 1,000 population in the country as a whole varies from three to six?

"2. That there is a minimum of approximately 9,000 crippled children in Alabama?

"3. That there are 6,062 diagnosed cases

in the crippled children files at the present time?

"4. That 32 itinerant clinics were held for crippled children last year?

"5. That during the past year 1,778 crippled children, not previously known, were examined at clinics?

"6. That there was an aggregate of 7,395 visits made to clinics by crippled children during the past year?

"7. That 1,101 crippled children were hospitalized and 664 children were provided with appliances during 1939?

"8. That expert orthopedic surgeons have been approved by the State Medical Board and by the Children's Bureau, Washington, D. C., to examine and treat the crippled children in Alabama?

"9. That there are four hospital centers for treatment and care of crippled children in Alabama; namely, Birmingham, Selma, Mobile, and Tuskegee Institute?

"10. That Alabama has a large number of crippled children waiting for treatment because of inadequate funds?

"11. That crippled children on the state register, who are in high school and ready for further service, are referred to the vocational rehabilitation service. That a guidance and planning program for them is discussed with the school authorities looking towards the selection of a job objective and training program after completion of school?

"12. That the most common causes of crippling conditions are: infantile paralysis, osteomyelitis, paralysis due to birth injury, clubfeet, and other congenital conditions? That children suffering with all types of crippling conditions including the above are given attention?"

# 30-Bed Unit to Be Built

Unit To Serve As Research and Training Center

**TUSKEGEE INSTITUTE, Ala.**—Ground was broken here Friday by Peter Cusack, New York City, and work will start immediately on the erection of the infantile paralysis center made possible by a grant of \$161,350 by the National Infantile Paralysis Foundation.

Mr. Cusack, executive secretary of the National Foundation, said the unit would be used for the treatment of handicapped Negro children and would serve also as a research and training center for nurses, physical therapists and doctors. With knowledge gained at the Tuskegee polio center, these trained workers would be able to return to their communities and wage a continuous battle against the disease, the speaker declared.

Prior to the ground-breaking exercises, the indoor program included brief addresses by Dr. F. D. Patterson, president, Tuskegee Institute, who presided; Dr. John A. Jenny, medical director and Dr. John W. Chenault, director of orthopedics, Tuskegee Institute; J. B. Hobdy, State Department of Education and Dr. J. N. Baker, state health officer, Montgomery; and Dr. A. W. Dumas, president of the National Negro Medical Association, Natchez, Miss.

Dr. Patterson paid tribute to the Rosenwald Fund, Dr. M. O. Bousfield, of the Rosenwald Foundation; Basil O'Connor, director of the Infantile Paralysis Foundation, New York City; to the county and

state welfare and health officials for their interest and cooperation in getting the unit started at Tuskegee.

## HEALTH PROGRAM LAUDED

Dr. Baker and Mr. Hobdy lauded the health program of the Institute and said the accomplishments of the various health services rendered by Tuskegee had far-reaching effect on the state. Dr. Baker said the State Health Department is intensely interested in an institution in Alabama where public health nurses could be trained and that no better place could be found than Tuskegee.

Dr. Kenney traced the medical development of the Institute from 1902, when typhoid, malaria, smallpox, pellagra and venereal diseases were prevalent, to the present when with modern sewerage disposal systems and with the advancement of medical science, together with the cooperation of county, state and federal health agencies, all these diseases had been greatly reduced.

Dr. Dumas pledged the united support of the National Negro Medical Association for the continuance of the new project, and said "with the consummation of this project, a great national emergency has been met."

## THIRTY-BED UNIT

Mr. Cusack was of the opinion that the establishment of the unit at Tuskegee Institute was the wisest step that could have been made and that the center was safe under the direction of Dr. John W. Chenault, director of orthopedics, one of the nation's two Negro orthopedists.

The Infantile Paralysis Center will be erected on the Institute campus near the site of the John A. Andrew Memorial Hospital and will consist of a thirty-bed unit for infantile paralysis treatment and research and will be modern in every detail with an adequately trained staff. Work will start on the structure immediately and students in the mechanical department of the Institute will be largely employed in the construction.

Sheffield Ala. Tri-Cities Daily  
March 13, 1940

## WILL CONDUCT CLINIC

**TUSKEGEE, March 13**—(AP)—Many noted physicians have been invited to participate in the 29th annual clinic of the John A. Andrew Memorial hospital at Tuskegee Institute April 7-13. During the same period, physicians from throughout the South will be here for the 22nd annual meeting of the John A. Andrew Clinical Society. Dr. John A. Kenney, Tuskegee Institute medical director, said the clinic was established "for the advancement of negro physicians and surgeons in the science and art of medicine and surgery and for the study of morbid conditions affecting thousands of needy sufferers in this section of the South." Dr. R. T. Adair, Montgomery, is president of the clinical society.

Gadsden Ala. Times  
March 12, 1940

## Physicians To Attend Tuskegee Clinic

**TUSKEGEE, Ala., March 12**—(AP)—Many noted physicians have been invited to participate in the twenty-ninth annual clinic of the John A. Andrew Memorial Hospital at Tuskegee Institute April 7-13.

During the same period, physicians from throughout the South will be here for the twenty-second annual meeting of the John A. Andrew Clinical Society. John A. Andrew, Clinical Society, Tuskegee Institute medical director, said the clinic was established "for the advancement of negro physicians and surgeons in the science and art of medicine and surgery and for the study of morbid conditions affecting thousands of needy sufferers in this section of the South."

Dr. R. T. Adair, Montgomery, is president of the clinical society.

Of much interest to the public is the invitation which comes through the Birmingham Health Association to attend the dedication exercises of the new 75-bed Negro sanatorium located at Jefferson Tuberculosis Sanatorium on Shades Mountain, on the Montgomery Highway on Sunday, Sept. 22, 4 to 5 p.m.

# Andrew's 23rd Clinic Brings 150 Medical Men To Tuskegee

Tuscaloosa, Ala., News  
May 16, 1940

## The Hospital Problem

THE decision to let the Emily Estes Snedecor Hospital at Stillman Institute handle the hospitalization of all negroes in the country and city was a wise one.

By the closing out of the negro ward at Druid City Hospital, 15 additional beds will be made available for white people. At the same time, the negroes—with 35 beds available at Stillman—will have double the number of beds which have been available to them at Druid City. This by no means solves the hospitalization problem, but it does bring temporary relief. Meanwhile, those who are interested in adequate hospitalization will continue to work for the permanent cure to this most serious of our civic problems.

## IN CHICAGO



Dr. John W. Chenault, director of Orthopedics at the John A. Andrew Memorial Hospital who is in Chicago, to purchase equipment for the Infantile Paralysis Center which is now under construction on the Institute campus. The center was made possible by a grant of \$161,350 by the National Infantile Paralysis Foundation.

**TUSKEGEE INSTITUTE, Ala.**—(ANP)—More than 150 medical men from all sections of the country attended the 23rd annual session of the John A. Andrew Clinic in the Andrew Memorial Hospital, last week.

As a tribute to Dr. John A. Kenney, one of the founders of the clinic who returned to Tuskegee after an absence of a score of years to become secretary-treasurer, men prominent in the medical world made a special effort to attend. Chicago's Provident Hospital sent a Pullman load of doctors, many of whom served as lecturers and specialists.

Among them were: Ulysses G. Dailey, Spencer C. Dickerson, Roscoe Giles, Ralph Scull, Walter S. Grant, Clarence H. Payne, John W. Lawlah, Carl G. Roberts, B. W. Anthony, T. M. Smith, W. M. Jones and Leonidas H. Berry.

## TYPES OF CLINICS

Clinics in various phases of medicine were held, with discussions, authoritative speakers, and demonstrations. The diagnostic teaching clinics included eye, ear, nose and throat, urological, neuro-psychiatric, dermatological, cardiac, orthopedic, obstetrical, pediatric, and roentgenological clinics, was in charge.

Seen during the week's program were the following outstanding medical personalities: T. K. Lawless, dermatologist and lecturer at Northwestern University, Chicago; Trygve Gunderson, eye specialist, Boston; Walter Gray Crump, surgeon, New York, and W. A. Younge, supervisor of cardiology, St. Louis. The John A. Andrew Clinical Society, organized in April, 1918, annually brings together physicians and surgeons in the interest of science and art in medicine and surgery, and for the study and treatment of morbid conditions affecting thousands of needy sufferers in this section of the South.

Officers are: R. T. Adair, Montgomery, president; S. M. Clark, Knoxville, vice-president; John A. Kenney, Tuskegee Institute, secretary-treasurer; and A. B. McKenzie, Tuscaloosa, general supervisor of clinics.

Talladega, Ala., Daily Home  
June 26, 1940

### API ASSISTS IN CANCER CLINIC AT TUSKEGEE

AUBURN, Ala., June 26.—The Alabama Polytechnic Institute, through its division of chemistry, is assisting with the cancer clinic now being conducted by the Tuskegee Institute Hospital in cooperation with the American Society for the Control of Cancer.

Dr. Herman D. Jones, associate professor of chemistry, is making the pathological diagnoses for the clinic. During the past two weeks, Dr. Jones has made pathological tests in connection with four cases, one of whom was a Lee County Negro.

"The clinic is performing a badly needed service for Negroes in this and adjoining states," said Dr. Jones.

Birmingham, Ala., Age-Herald  
June 25, 1940

### NEGRO HOSPITAL SOUGHT FOR CITY

WASHINGTON, June 24.—(P)—Trustees of the National Negro Hospital Foundation petitioned the federal government today to build six 100-bed hospitals for Negroes at half a dozen cities under the projected \$60,000,000 federal hospital aid program.

The trustees said the hospitals could be used for the training of Negro physicians and nurses. They recommended location at Louisville, Memphis, Atlanta, Birmingham, Charleston, S. C., and Dallas, Tex.

Opelika, Ala. News  
June 27, 1940

### API Assists Cancer Clinic At Tuskegee

Auburn, Ala., June 27.—The Alabama Polytechnic Institute, through its division of chemistry, is assisting with the cancer clinic now being conducted by the Tuskegee Institute Hospital in cooperation with the American Society for the Control of Cancer.

Dr. Herman D. Jones, associate professor of chemistry, is making the pathological diagnoses for the clinic. During the past two weeks, Dr. Jones has made pathological tests in connection with four cases, one of whom was a Lee county negro.

"The clinic is performing a badly needed service for negroes in this and adjoining states," said Dr. Jones.

Atlanta, Ga. Constitution  
June 30, 1940

### Negro Lauds Service At Grady Hospital

Editor Constitution: Allow me to express my sincere appreciation and that of the people of my race for the efficient service rendered at Grady hospital. Doctors, nurses, supervisors, maids and orderlies do all in their power to make a patient comfortable and to assist him in his efforts to get well as quickly as possible.

The writer was a patient for 29 days during February of this year, and has since been getting treatment at the clinic which is equipped with comfortable benches and can accommodate the great number who, like myself, would have to go without expert medical and surgical care were it not for this hospital.

Atlanta is to be congratulated on having such a fine house of healing so expertly directed. The Bible says, "Give honor to whom honor is due." Truly I would honor Grady hospital, and say to those of the colored race that need its services that they may get the care there that will enable them to say with me, "Thank God for Grady hospital."

Anniston, Ala. Star  
July 9, 1940

### SUGGEST HOSPITAL UPON BARBER LANDS

#### National Negro Organization Advised About Seminary

The Anniston Chamber of Commerce has addressed a letter to the National Negro Hospital Foundation in Washington suggesting that it investigate the possibility of taking over and utilizing properties of Margaret Barber Seminary as a Negro health center and training school for colored nurses.

A description of the school's properties was given in the letter. The dormitory building has 144 rooms and it is said this building could be converted into a hospital.

The Negro Hospital Foundation is seeking a \$60,000,000 fund to carry on its nation-wide work, and if this money is made available, inquiries into the hospital possibilities here may be made.

### Negro Sanatorium Is Dedicated Here

A new 75-bed building for Negroes at the Jefferson County Tuberculosis Sanatorium was dedicated at 4 p.m. Sunday, with Dr. A. L. Ballard, director of Waverly Hills Sanatorium for Negroes, Louisville, giving the address. Short talks were made by Dr. J. L. Downing, city, county health officer, City Commissioner W. Morgan, County Commissioner Henry W. Sweet, and J. L. Drakefield, president of the Alabama Anti-Tuberculosis Association.

## Says Tuskegee Hospital Must Have Funds For Indigent Sick Negroes

NOV 9 1940

TUSKEGEE, Ala.—"What can we do when men and women, sick and suffering, in need of immediate relief by treatment or operation, come without money to the John A. Andrew Memorial Hospital which has not one single penny in its budget for charity or indigent patients? If we turn these people away where can they go? There is no city hospital, no county hospital. When we turn them away, they go back to their farms to die. These are our people. What can we do?"

Dr. John A. Kenny put this question squarely up to the members of the Community Hospital Aid Society of the John A. Andrew Memorial Hospital at its first meeting of the school year in the Clinic Building on the Campus of Tuskegee Institute.

Mrs. T. M. Campbell, the president, expressed the belief that not only the members of the organization, but people of the community and those in the 50 mile area served by the John A. Andrew Hospital should be told of the inability of the hospital to minister to the thousands of indigent rural Negroes unless funds are provided for hospitalization and medicines.

Dr. Kenny made it clear that the Institute has provided the building, facilities and utilities; the physicians will give their services without fee; but the public—clubs, fraternal organizations, individual citizens, white land owners—will have to help the Hospital Aid Society in doing the rest, if suffering Negro indigents are not to be sent back to the farms and plantations to die.

Mrs. Carrie S. Ramsey was appointed chairman of a committee to form a committee of 100 women to give \$5.00 each. The \$500 raised in this manner is to be applied to the maintenance of a bed for indigent maternity cases. Other committees were appointed to make an intensive campaign for memberships and contributions. \$250 will about

maintain a charity bed for 6 months.

All indigent patients are urged to help with their bills even if the amount is no more than 50c. a month. The patient is admitted if the Hospital Aid Society will guarantee payment of the bill. Whatever the patient is able to pay goes into the revolving fund of the society.

Over \$500 was collected by the society last year, but five times that amount is needed to half way meet the needs this year of crop failures throughout the South.

## Freedmen's Chief Reports Achievements of Hospital

WASHINGTON, D. C. — Obtainment of an allotment of \$700,000 from the PWA for the construction and equipment of a tuberculosis unit was the chief achievement of Freedmen's Hospital in the last fiscal year according to the annual report of Dr. T. Edward Jones, senior medical officer.

The addition of 150 beds for the treatment of tuberculosis in the District, which will be available when the unit is completed in July, will lessen a deficiency and benefit colored residents, among whom the incidence of tuberculosis is high, Dr. Jones stated.

### ICE PLANT REPLACED

Another achievement he reported was the construction of a new ice plant adequate to supply the hospital and the tuberculosis unit when it is completed. The refrigeration system it replaced, he stated, was a hazard to the health of patients and was inadequate for the preservation of foodstuffs.

Antiquated plumbing throughout the hospital, more than 30 years old, was replaced also, he said.

### PATIENTS INCREASE

Dr. Jones reported that there were 73,196 outdoor visits to clinics at the hospital in the fiscal year ended June 30, as compared with 55,304 in 1938, and 23,560 in 1937.

The largest single clinic increase in the out-patient department, he stated, was the lunatic clinic. For the fiscal year ended June 30, there were 924 new patients and the entire number of visits totaled 21,439, or an increase of 10,284 visits over the previous year.

He also reported that the next two largest clinics, the genito-urinary and the surgical, including the surgical diagnostic clinic showed marked increases.

The figures for the G-U clinic showed 904 new patients for the fiscal year 1939 and total visits of 8,581, as compared with 961 new pa-

tients in the fiscal year 1938 and total visits of 7,819. There were 7,819 surgical clinic visits recorded for 1939 as against 7,370 for 1938.

The total number of indoor patients under care for the fiscal year 1939 was 6,710 as compared with 6,225 in 1938. "This increase," Dr. Jones stated, "took place in spite of the fact that some of our beds were inactive because of an insufficient nursing personnel."

### INSUFFICIENT NURSES

Increased appropriations for personnel in the current fiscal year, he said, will permit the re-occupancy of wards previously inactive.

But the increase in nurses and attendants, he stated, is not sufficient to meet the requirements of the National League of Nursing Education, which must be met if Freedmen's is to maintain its school of nursing and preserve its accreditation by all States.

While the school of nursing represents a financial liability to the Federal Government, Dr. Jones said he believes that the increased expenditure will yield a wholesome dividend in the preservation of the health of the nation.

He pointed out that only 272 colored student nurses graduate in the United States in any one year and Freedmen's Hospital supplies 12 per cent of that number.

This number of graduates, plus those already engaged in the practice of their profession, gives one colored graduate nurse to every 5,120 colored nurses. There are graduated yearly in the United States 5,126 white student nurses, which gives one white graduate nurse to every 296 white persons.

Another highlight of the last fiscal year was the establishment of a blood bank at Freedmen's, Dr. Jones reported. As a result, he said, the number of transfusions performed in the hospital has increased.

## JOHNS HOPKINS SPECIALISTS AT INTERNES MEET

Three Johns Hopkins Hospital specialists are included on the three-day scientific program at the twenty-first annual session of the Association of Former Internes of Freedmen's Hospital which will meet at the hospital in Washington, D. C., June 4, 5 and 6, it was announced this week.

Dr. Richard W. TeLind, gynecologist-in-chief, Johns Hopkins Hospital, Baltimore, Md., will discuss "Organic Causes of Uterine and Genital Bleeding."

Other Johns Hopkins specialists and their subjects are:

Dr. Joseph Earle Moore on "The Discussions of Standards in the Cure of Syphilis"; and Dr. Perrin H. Long on "The Clinical Evaluation of the Use of Sulphanilamide, Neoprontosil, Sulphapyridine and Sulphothiazol on the Treatment of Infections."

Officers of the association are: Dr. Ralph Young, Baltimore, president; Dr. Hugh A. Simmons, Washington, executive secretary; Dr. Robert S. Jason, Washington, secretary; Dr. J. H. Parker, Red Bank, N. J., assistant secretary; and Dr. L. Greely Brown, Elizabeth, N. J., treasurer.

## Freedmen's Budget Cut Partially Restored

WASHINGTON, D. C.—Freedmen's Hospital will get \$14,780 of the \$22,480 cut made by the House Appropriations Committee in its budget estimates for 1941, if the Interior Department appropriation bill, which is now pending in the Senate, is passed in its present form and agreed to in conference. The Senate Appropriations Committee restored that much of the House reduction before reporting the Interior Department supply bill.

The amount put back into the bill covers salaries totaling \$9,780 and general operation and maintenance expenses of \$5,000. One item restored provides salaries for two clerks for the general hospital at \$1,440 each. Another provides salaries for six months for eleven positions in the new tuberculosis unit, totaling \$6,900.

The Bureau of the Budget allowed three additional clerks for the general hospital, but the House committee disallowed two of them. According to both E. K. Burlew, First Assistant Secretary of the Interior, and Dr. T. Edward Jones, director-in-chief of Freedmen's Hospital, the two clerks disallowed by the House committee are essential to the efficient maintenance of the accounting and other records of the hospital.

There have been many complaints about the records made at Freedmen's Hospital. The General Accounting Office has installed a new system of accounts, and the patient-records system of the hospital has been revised. In addition, the Senate Appropriations Committee was advised, the patient load of the hospital has increased with a corresponding increase in the volume of clerical work.

For the new tuberculosis unit 70 new positions were approved by the Budget Bureau. This number is far below the number of employees recommended by the American College of Surgeons and the American Medical Association, and the American Hospital Association as necessary for a class A institution.

## Senators May Restore Part of Freedmen's Cut

WASHINGTON

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## FREEDMEN'S HOSPITAL SCHOOL OF NURSING

WASHINGTON, D.C.

A three-year basic course in nursing. Theoretical and clinical instruction available as follows: General medical and surgical nursing and specialties, Pediatrics, Obstetrics, Psychiatry, Public Health, Out-Patient Clinics.

Admission requirements: Age 18 to 20; unmarried; graduation from a four-year accredited high school.

For further information and catalogue, write

**DIRECTOR OF NURSING**

Freedmen's Hospital

Box T

## PLANNING NEEDED.

A man died recently in a Washington, D. C. hospital after lying unconscious for almost an hour at the scene of a traffic accident awaiting the arrival of an ambulance. Such a delay could not have occurred if the city had a sure, simple, well-understood system of dispatching ambulances in emergency cases.

At present the District of Columbia government has contracts with three local hospitals (two white and one Negro) to supply all emergency ambulance service needed in the national capital, and the fire department renders ambulance service in connection with fires, asphyxiations, and drownings.

Investigation of the case disclosed that when policemen arrived on the scene of the accident they were told an ambulance had already been summoned. They waited a reasonable length of time, then called the hospital which should have rendered the service. The hospital had no record of a previous call; an ambulance was then dispatched and reached the scene promptly. Public clamor for action to prevent a recurrence of such cases resulted in a request by the district commissioners for a report on ambulance service in Washington from the District of Columbia health department.

Practices in the matter of emergency ambulance service vary widely from city to city. In many cities such service is left entirely to private hospitals and operators. In some cities it is supplied under contract, as in the District of Columbia; in others it is handled exclusively by fire department rescue wagons or police department patrol-ambulances.

The new system recommended by Public Health Officer Ruhland for the District of Columbia, in a report just submitted to the district commissioners, is modeled upon the central ambulance dispatch bureaus in operation in New York city and Baltimore. Ruhland recommends establishment of a central ambulance bureau which would operate on a twenty-four hour basis with a dispatcher to handle all emergency calls, sending city-owned ambulances to the scene to transport the person or persons in need of medical attention to the nearest hospital prepared to render appropriate treatment.

Thus, responsibility for any faulty ambulance service would be definitely fixed. Another evil of the present system which would be overcome is the practice of the hospital ambulances now rendering emergency service of taking injured persons to their

own hospitals regardless of whether or not another hospital is nearer at hand.

Ambulances operated under the proposed service would be equipped with radios tuned to the police radio station. Thus, they would be in constant touch with police investigations of accident cases. The radios would also be invaluable in correcting mistakes in the original directions which might be discovered before the ambulance reached the scene. The district health officer does not recommend that a physician necessarily accompany each ambulance. He suggests, however, that both the driver and his assistant have expert training in first aid measures.

And every state and city might properly give some consideration to this problem, in a day when highway accidents are the rule rather than the exception.

## FREEDMEN'S HOSPITAL WINS A.C.S. APPROVAL

NOV 2 1940

WASHINGTON, Oct. 31—(ANP)—Among the 19 hospitals in Washington on approved list of the American College of Surgeons, Freedmen's hospital ranks among the best. The classification was based on a survey made in 1939, according to a member of the staff. Announcements of the rating came as part of the official statement of the 30th annual clinical congress of the American College of Surgeons, which convened in Chicago.

## Survey Gives D. C. Hospital High Rating

NOV 3 1940

WASHINGTON —(A. N. P.)—Among the 19 hospitals in Washington on approved list of the American College of Surgeons, Freedmen's hospital ranks among the best. The classification was based on a survey made in 1939, according to a member of the staff. Announcements of the rating came as part of the official statement of the 30th Annual Clinical congress of the American College of Surgeons, which convened in Chicago.

Requirements for recognition included 10 points: 1, a modern physical plant, assuring the patient safety comfort and efficient care; 2, clearly defined organization, duties, responsibilities and relations; 3, carefully selected govern-

ing board with complete and supreme authority; 4, competent, well trained superintendent, responsible to the governing board; 5, adequate and efficient personnel, properly organized and competently supervised; 6, organized medical staff of ethical, competent surgeons and physicians; 7, adequate diagnostic and therapeutic facilities under competent medical supervision; 8, accurate complete medical records; 9, regular group conferences of the administrative and medical staff, and 10, a humanitarian spirit—the primary consideration being the best care of the patient.

# Freedmen's Hospital Bids Ickes Goodbye

WASHINGTON, D. C. (ANP)—Freedmen's Hospital said goodbye, officially, last week to the Department of Interior and Secretary Ickes when Dr. T. Edward Jones, head of the hospital and other members of the hospital staff, gathered in Mr. Ickes' office where they were met by the secretary and about 30 members of his department.

Dr. Jones thanked Mr. Ickes and the department for courteous and helpful attitudes and "for the great expansion of the hospital plant" which has been carried forward during the seven years in which Mr. Ickes was Public Works administrator.

The hospital was started as a bureau for the relief of newly freed slaves and first consisted of a brick building 54 feet by 100 feet in size, in which were located three wards. The present plant, said Dr. Jones, consists of four acres and is steadily growing, and with the completion of the new tuberculosis unit, will be one of the finest hospitals in the country staffed by Negroes.

The department of interior has administered the affairs of Freedmen's Hospital and the Howard Medical school for 60 years.

## Freedmen's Shifted to Public Health Service

The administrative functions of Freedmen's Hospital, now controlled by the Federal Security Agency, was last week placed under the supervision of the United States Public Health Service by order of Federal Security Administrator Paul V. McNutt.

Administration of the hospital, established in 1862, was transferred to the Federal Security Agency from the Department of the Interior on July 1, as a part of the President's reorganization order No. 4.

Howard U. Also Transferred  
Howard University is another institution transferred to the Federal Security Agency from the Interior Department.

Mr. McNutt directed that the facilities of the public health service be made available to and utilized by Freedmen's Hospital, and that the "cooperative agreement for the management and operation of Freedmen's Hospital," executed on October 27, 1939, by the Secretary of the Interior, the President and the acting secretary of Howard University, shall remain in full force and effect.

# Citizens Present \$1,650 Iron Lung to Provident

Workers Lauded by City Officials; to Launch New Project in the Fall

BALTIMORE — Mr. Dixon announced that the committee will continue to function as a humanitarian agency and would launch another project in the fall.

"This is one of the things that we didn't go to the city government, the State government, or any charitable organization to get, we did it ourselves," said Carl Murphy, president of the AFRO-AMERICAN Newspapers, in formally presenting the \$1650 iron lung to Provident Hospital in the YMCA gymnasium Monday evening.

Following the presentation, attended by 125 persons, J. Preston Linberry, president of the hospital's board of trustees, in accepting the gift, said:

"The purchase of this iron lung is an expression of the humanitarian spirit of the civic-minded citizens of Baltimore City, and an outstanding example of benevolence and charity."

This gift was the result of the first project sponsored by the Progressive Citizens' Committee of Baltimore, William B. Dixon, president.

### Mayor Speaks

Other speakers on the program, who congratulated the committee for its work, were: Dr. Henry Beuttner, of the Baltimore Health Department, William B. Dixon, and Daniel C. Ellison, city councilman. Governor Herbert O'Connor, who was scheduled to appear on the program, was unable to attend.

"We live in a nation and under a form of government, where we have the right to do what we are doing here tonight," Mayor Jackson said. "I hope the day will never come when the government of this country will make it unpopular for people to do things of this type for one another," he added.

### To Continue Work

City Councilman Ellison told the audience that Sydenham Hospital, white, does not have an iron lung, and that he felt sure that Provident would be willing to lend the respirator at times when it would not be in use and

needed elsewhere.

Music for the program was provided by Leonard Wilmore and Leroy Davis, who sang; and Gerald Wilson and Edward McCready, who gave piano selections.

A gold wrist watch, donated by Kermisch's Jewelry Store, was awarded to Mrs. Martha Thompson, a member of the committee, who raised \$247, the highest individual sum, in the iron lung drive. Mrs. Florence Douglass and Miss Zelma Davis were runners-up, taking second and third places respectively.

At the end of the program an explanatory demonstration of the respirator was given by Tazewell E. Johnson, treasurer of the citizens' committee. James A. B. Callis acted as master of ceremonies.

# Model Filing System *Journal & Guide* Developed By WPA

7-27-40  
**At Freedman's**  
*Norfolk, Va.*

WASHINGTON, D. C.—A comprehensive filing system which provides a model for similar institutions has been completed by a corps of District of Columbia WPA workers at Freedmen's Hospital.

"This project has been of inestimable value to our institution," Dr. T. Edward Jones, surgeon-in-chief of Freedmen's Hospital, said of the completed work. "In addition to setting up a valuable record system for our hospital, the WPA has provided a filing system which is an example for similar institutions."

Work on the project was started July 5, 1938. As many as 43 qualified typists, clerical workers and other white collar workers were engaged at peak employment.

Tampa, Fla. Tribune  
March 3, 1940

## Lake City To Get New Hospital for Negro Veterans

WASHINGTON, March 2.—(Special.)—A new hospital for negro World war veterans at Lake City, to cost \$112,500, will be built by the veterans administration early next summer, Senator Andrews announced here today.

The new building is provided for in the independent offices appropriation bill, and the fund will become available July 1. Beds for 100 hospital patients will be provided.

The new structure will take the place of an old building which recently was described as inadequate and obsolete by the Florida American Legion.

Starke, Fla. Telegraph  
March 22, 1940

## FOR NEGRO VETERANS

Lake City.—A new hospital for negro World war veterans to cost \$112,500, will be built by the veterans administration early next summer. The new building is provided for in the independent offices appropriation bill, and the fund will become available July 1. Beds for 100 hospital patients will be provided. The new structure will take the place of an old building which recently was described as inadequate and obsolete by the Florida American Legion.

Miami, Fla. Herald  
Nov. 16, 1940

## CHANGES SEEN FOR HOSPITAL

Clay Says Improvements  
Planned Depend On  
Budget

By STEPHEN TRUMBULL  
Herald Staff Writer

Still denying he contemplated any blitzkrieg tactics at the frequently criticized Jackson Memorial hospital, Dr. Charles L. Clay, new head of the institution, inti-

imated Wednesday that some improvements are in the offing.

With the regular budget estimate on which he is now working he will present the city manager with a supplementary budget which, if adopted, would make possible these improvements.

While he refused to divulge the nature of these contemplated changes in advance of his official report, it was believed they would include three of the most frequently criticized points in the hospital—crowding in the Deering charity ward, even more acute crowding in the negro wards, male and female, and lack of a sufficient number of nurses.

### To Keep Within Budget

"The regular budget will, of course, be kept within the millage allocation for support of the hospital," Dr. Clay said. "The accessory budget will cover additions in facilities and equipment for which the need is believed to be acute. The extent to which this accessory budget can be filled is, of course, limited by the funds available."

With the peak of the season past, crowding in the Deering white ward is not as acute as it was, Dr. Clay explained. Next season, however, the institution must again face the prospect of temporary cots between the beds, and last moments of the dying without even a vestige of privacy for them or the family members who may surround their beds.

Dr. Clay, who took over the position of superintendent on May 1, has indicated he believed this should be among the first spots for additional facilities.

### Cots Placed In Aisles

The negro wards are still so crowded that cots are placed not only between the beds, but in the aisles.

"It's a question of doing this or sending them back to homes where there are no facilities for their care," Dr. Clay explained during an inspection of this ward. "We can only take the lesser of two evils."

The new head of the institution denied any immediate plans for widespread changes in hospital personnel.

"I still haven't been here long enough to discuss that," he said. "In making any changes in personnel, a machine or an organization it is advisable to first make sure that the change will be for the better."

Quincy, Fla., Times  
August 22, 1940

## NEGRO READING ROOM PLANNED AT HOSPITAL

Plans to extend the state hospital library to include a reading room for negro patients were announced this week by Dr. J. H. Therrell, superintendent. The negro library, which will occupy a room in the negro female department, will be equipped, at first, with about 10 books, to be selected and changed at regular periods by Miss Lucille Rooks, librarian. Later the branch library probably will be enlarged.

Already the library has been extended to provide a reading room for inmates of the hospital prison camp in Jackson county. This branch is also conducted by the exchange method.

The library was founded by the Order of the Eastern Star.

Tampa, Fla. Tribune  
October 28, 1940

## Hospitals Approved

Announcement that three Tampa hospitals have been placed on the American College of Surgeons' fully-approved list will be received by Tampans with genuine satisfaction. We believe sincerely that few cities of Tampa's size in the nation can equal this outstanding record.

These three first-rate institutions, Tampa Municipal Hospital, St. Joseph's Hospital and Clara Frye Municipal Negro Hospital, the latter getting the rating for the first time, all earned the recognition because they met stringent and exact requirements of the surgeon's association. This approval did not come automatically as is shown by the fact that of the 2806 hospitals in the United States and Canada, less than half were given the highest accreditation.

While Tampans naturally are pleased because of this recognition, it does not necessarily hold that they will be satisfied to see conditions remain exactly as they are at present. In the words of Dr. Irvin Obell, who made the announcement, there is occasion for "intensified effort to improve hospitals generally."

With continued cooperation and improved service, we are confident they will be

Jacksonville, Fla. Times-Star  
December 17, 1940

## Raymond Firm Gets Contract

Construction Company to  
Build Hospital Unit.

Award of a \$161,800 contract to the J. M. Raymond Construction Company, veteran Jacksonville firm, for a negro patients' building at the Veterans Administration Hospital, Lake City, was announced yesterday.

The building will provide space for 160 additional beds, according to the Veterans Administration announcement.

Work will begin immediately, the contract calling for completion within 275 calendar days.

# Behind the Front Page

By **ELLIS HOLLUMS**

Executive Editor, The Herald

WE DEVOTED some space in this column a few days ago to tell you about the need of an x-ray machine and a chemical laboratory out at Christian hospital in Miami's negro town, and you can imagine how happy I am to tell you this morning that two checks for \$100 each were forwarded to K. L. Pharr, treasurer of the hospital, almost immediately thereafter.

The donors are very insistent that their names not be made public, and in deference to their wishes I cannot print them, much as I'd like to.

One is a woman, visiting here from Chicago. The other is a Miami institution organized and operated by pioneers in the community.

Charity appraised in strict anonymity is charity, indeed.

Christian hospital, tiny as it is, is the only one exclusively for negroes in the Miami area. With a population of some 40,000 colored people, it is wholly inadequate to meet the needs of the negro community. The publicly owned hospitals have wards for negro patients, but they, too, are inadequately equipped, due to lack of sufficient funds.

Some day we are going to have a modernly equipped, 300-bed hospital for negroes, but in the meantime, we ought to do as much as we can to help the present Christian hospital get that x-ray machine. If you can spare a few dollars or a lot of dollars, just make your check payable to K. L. Pharr, treasurer, and drop it in the mail.

INASMUCH as Miami is getting ready for its annual Community Chest campaign, I was interested in what they are doing up at Fort Lauderdale when I was there the other day for the highway meeting. August Burghardt, secretary of the Fort Lauderdale Chamber of Commerce, gave me a copy of the November report to subscribers.

Current year's quota was \$25,000, but the people oversubscribed that amount by \$2,273.22. Practically all

the money pledged already is in hand, and the year has two more months to run.

That \$25,000 budget for Fort Lauderdale proportionately is larger than any we have had in our Dade County Community Chest lately, but the spirit of the Broward county town is such that they don't seem to have any difficulty reaching any goal they set.

And, incidentally, while I was in Fort Lauderdale, I didn't see one person without a bright and shiny new Red Cross lapel button—that is, one resident. Several of us from Miami didn't have one, and some of the visitors from the upper East coast had failed, too, in wearing one, but Lauderdale residents were all prettied up with 'em.

SOME days ago Bill Anthony sent me an affidavit from one Fred deMarco, private in Company D, 113th infantry, 44th division, who had been sent north on the hobo express, in which deMarco recited that Miami police had taken from him his leave papers and his wallet before shipping him out of town. He went on to say that police had refused to communicate with army authorities, or allow him to do so.

I printed the affidavit, but set out that IF what deMarco said was true it was a sad commentary on our police department.

The police didn't have a word to say, but they were burned up about it. Detective Sergeant Charles F. Schwelm had handled the deMarco case, and he followed it up after that affidavit was published.

Comes now Sergeant Schwelm in rebuttal, taken from the record, and here are the facts: DeMarco was

taken in custody about 2 a. m., sleeping in Bayfront park, filthy, sullen and without papers. He told police that he was out of Camp Dix, N. J. In that respect he told the truth. A city detective called at army recruiting station here and told a sergeant that deMarco was in custody. The sergeant told him to turn the boy loose to make his way back to camp as best he could; that the army had no provision for returning soldiers AWOL to quarters.

The police checked with New Jersey and discovered that deMarco was a liar by the clock as to his being on sick leave by virtue of having suffered a broken arm in line of duty. He not only hadn't suffered a broken arm, but he was absent without leave and would be classified as a deserter after 10 days of such absence. The police were advised to turn the boy loose, and warn him that if he didn't get back to quarters within the time limit, he would be subject to court-martial for deserting. He was given that message and sent to the Broward county line, as a means of helping him on his way.

In the course of the inquiry, it developed that deMarco had been a juvenile delinquent, had been in court half a dozen times on petty offenses. When he reached the age of 20 he branched out as a burglar and was up twice for breaking and entering, being paroled by a tender-hearted judge the first time, and the second time (just before his 21st birthday) sentence again was suspended upon his promise to join the army.

That's the facts, deMarco's affidavit to the contrary notwithstanding.

# RECALL DEATH OF JULIETTE DERRICOTTE, FISK U. DEAN, IN FIGHT ON HOSPITAL BILL

into the bill was launched last week.

WASHINGTON. — The Alpha Kappa Alpha Non-Partisan Council calls attention this week to plans underway in congress to pass the "National Hospitalization Act of 1940" without any safeguards for the welfare of Negroes. The bill is designed to put hospitals at government expense "in rural districts and economically depressed areas," which means that the majority of the hospitals will be placed in the South where health conditions are worse among Negroes.

"Negroes have the worse health conditions of any other group in America," the Council said. "Statistics show that although they have one-tenth of the population they get one-thirtieth of the hospital space; there is one hospital bed for every 150 white persons and one bed for every 2,000 Negroes and that there are only 120 hospitals in the entire South serving nine million Negroes."

"Every Negro knows of some specific case where some one died or suffered unduly because of discrimination and lack of hospital facilities in the South. Perhaps the most outstanding of these cases resulted in the death of Juliette Derricotte, late dean of women at Fisk university, who was making a trip from Nashville to Atlanta, and met with a serious automobile accident. After trying to get treatment in several hospitals and being refused, she at last received treatment in the basement of a hospital, but too late to save her life."

"In spite of this appalling situation, there is nothing in the bill that provides for an adequate distribution of the funds proportionately to the health need of Negroes; nothing which provides that Negro physicians be allowed to follow their patients into hospitals; that Negro nurses and personnel be provided; nor for the equalization for services rendered."

"A campaign, by 30 national organizations, to write safeguards

"All readers are urged to send affidavits of any race discrimination in hospitals anywhere in the United States. The affidavits should specify names, addresses, and dates regarding the discrimination and as many details regarding the discrimination as possible. Since the bill may be brought up almost any time, readers are urged to send in the affidavits at once to the National Non-Partisan Council on Public Affairs of Alpha Kappa Alpha, 1120 Girard street, N. W., Washington."

# RACE GROUPS ENDORSE U. S. HOSPITAL PROGRAM

## Provisions Against Discrimination Urged

WASHINGTON—(SNS)—Dr. Carl G. Roberts, chairman of the department of surgery at Providence Hospital, Chicago, Tuesday spoke to a senate subcommittee for several colored organizations in which he endorsed the bill for a \$10,000,000 hospital building program, but asked that provisions against racial discrimination be strengthened in the proposed measure.

Dr. Roberts asked the subcommittee considering the legislation to require that the proposed hospitals be available to all patients or qualified doctors, "without discrimination on account of sex, race, creed, color or religion".

The Chicagoan warned that the high incidence of disease among colored people was a constant menace to the health of the white population as well. He warned that "Epidemics start in alleys but finish in the boulevards."

It was declared that the problem of inadequate hospital facilities for colored people had no sectional limitations, existing in urban districts of the North as well as rural districts of the South.

The colored populace in Chicago has access to only one-fortieth of the available hospital beds although it composes one-twelfth of the total population, Dr. Roberts declared.

## PLIGHT TOLD IN SENATE

### Appeal in Plan to Expand Hospital

CHICAGO, (ANP) — Dr.

Carl G. Roberts, prominent Chicago physician and past

president of the National Medical association, appeared before the United States Senate committee Monday to discuss medical legislation now before Congress. Summoned by Senator James Murray, chairman of the senate committee on medical matters, he was accompanied by Dr. Numa P. G. Adams, director of the Howard Medical School.

Dr. Roberts represented the National Medical Association with its 5,000 colored physicians,

phasized the plight of the colored American.

### Dire Lack

"In the whole United States," he declared, "there are only 7000 hospital beds for a Negro population of 12,000,000. At present, the Negro's life expectancy is eight or ten years less than that of other groups. The death rate among Negroes is 50 to 100 per cent higher."

"There is pressing need for more hospitals not only in rural but urban communities. In Chicago, with a Negro population of 230,000 — one-twelfth of the city's total—there are but 135 hospital beds open to Negro patients. This is a problem concerning white people as well as my own race. Epidemics may start in the alleys but they often end on the best residential streets."



Dr. Roberts

# Leaders Tell Senate of Hospital Needs

WASHINGTON. The insertion of the words "without discrimination on account of sex, color or religion" in several sections of the National Health Bill was urged by the National Medical Association at the hearings on the bill before the Senate committee last week.

In stressing the need for hospital facilities, Dr. Carl Roberts of Chicago, representing the association, stated that there are available for the entire colored population of the country only 7,000 beds, which means one bed to every 2,000 persons, compared with a total of 1,161,380 beds for the remainder of the population.

Dr. Roberts added "In Chicago, less than 3 per cent of the hospitals accept colored patients and 2½ per cent of these are charity or teaching institutions and the proper ½ per cent represents a colored hospital."

## Mississippi Problem

Dr. E. R. Carney, of Detroit, president of the National Hospital Association, who testified following Dr. Roberts, stated that in Mississippi there are 1,000,000 colored people and only 65 hospital beds are available for them, and in the State of Texas with 900,000 colored, there are 200 hospital beds available.

He further stated that in recent years a large addition has been made to the number of hospital beds available but of these, 60 per cent are for insane persons; 25 per cent are in general hospitals and 15 per cent for tuberculosis.

Others who substantiated the testimony of Dr. Roberts and Carney were Dr. Paul C. Cornely and Dr. Dorothy Boulding Ferebee of the Howard University Medical School.

## Safeguards Urged

Dr. Charles H. Houston, representing the NAACP, urged that a colored person be placed on the National Advisory Hospital Council, which the act would set up, and that the act specifically prohibit discrimination in training personnel for hospital work, and in the State administration to the hospital program.

Under the present plan, the bill calls for an outlay of \$10,-

000,000 by the Federal Government to erect in the South such hospitals as are needed to carry out the health program indicated by the U. S. Public Health Service, with the hospitals to be administered by the local governments.

## Senator Davis Urges Hospital Building Program

Construction of six 100-bed hospitals for Negroes in the South as part of the Federal Government's forthcoming \$60,000,000 hospital-building program was urged by Senator James J. Davis (Rep., Pa.) speaking over the Mutual Broadcasting System on Thursday night. Another speaker on the program was the Rev. Amos H. Carnegie, executive secretary of the National Negro Hospital Foundation, sponsor of the movement.

Senator Davis said in part: "I voted for the \$60,000,000 appropriation to build needed hospitals in the rural areas and economically depressed districts because I believe there is a great need for such a program.

"Your request is a modest one and I believe you will get the hospitals. You need them. Nobody can deny that. There is no reasonable excuse that could be offered for your not getting them."

## Need is Woeful

"The South," said the Rev. Mr. Carnegie, "is where 10,000,000 Negroes live and where the need for adequate hospitalization of the Negro sick and hospital facilities for the training of colored physicians and nurses is woeful.

"Unless separate hospitals are built for the colored race, it will not be benefited by a hospital building program such as the Government is about to undertake."

He suggested that the hospitals be situated in Louisville Ky., Memphis, Atlanta, Birmingham, Ala., Charleston, S. C. and Dallas.

## Medics To Hear Plans For 6 Negro Hospitals

WASHINGTON, Aug. 8—A sympathetic appraisal of the efforts of the Rev. Amos H. Carnegie, founder and executive secretary of the National Negro Hospital Foundation, to have six 100-bed hospitals for Negroes erected out of Federal funds will be made before the executive committee of the National Medical Association convention in Houston, Tex., this month, by Dr. C. Herbert Marshall, Jr., chairman of the local delegation.

The objective of Dr. Marshall's presentation will be the alignment of the medical profession behind the movement. He will also offer a proposal for the establishment of a hospital for mentally ill colored persons. The last named is sponsored by Dr. Ben Karpman, professor of psychiatry at Howard university and psychiatrist at St. Elizabeth's hospital.

Dr. Washington, a member of the Washington Medico-Chirurgical society, will leave here on Thursday with his group in a special car which leaves from New York carrying the delegation from that state. The delegates will be entertained in New Orleans over Saturday before resuming their journey.

I must pay tribute to Dr. W. L. Haywood and his consistent efforts at Great Western Hospital. This diminutive, tireless, capable surgeon has given time, service and money in pioneering the cause of Negro hospitalization, that victims may have comfort in the throes of disease. His record as a surgeon and county physician has been lauded by many.

Nevertheless, the lack of a well equipped hospital for Negroes in charge of race members has created several problems. First, Negro surgeons are deprived of laboratories and equipment in which to work; second, there are thousands of dollars which go out of the race yearly for medical care, which could be well retained if we had the type of institutions we need.

It seems to me the height of folly for a man to spend eight years or more specializing in a particular field of surgery and later have no available means of putting to practice this knowledge. His loss seemingly is double. He loses step in the knowledge of the latest scientific developments in combating disease; too, his experience is limited only to the patients who seek his service, whereas a hospital furnishes a large variety of cases.

Economically, a good hospital for Negroes in Oklahoma City is a most vital need. The money which goes to other institutions from Negroes could be turned back to the race in terms of service and education. Service for the afflicted, a school for training nurses, and a field of experience for internes. Tulsa's city hospital for Negroes is the best of its type in the state and yet it does not fully meet the needs of its community.

However, Negroes in Oklahoma City and remote areas who need hospitals and clinics will not secure them until the people of

the state make a unified effort. In the western part of Oklahoma especially have Negroes suffered for the lack of hospitalization. Many have died waiting for a vacant bed in the tuberculosis sanitarium at Clinton. Others were denied entrance to hospitals of that area because they too were overcrowded. Still we have not raised the type of protest which will awaken all to the cause of Negro health to gain our needs. I say here and now, the initial effort must be made ourselves. It is our problem as well as one for the legislature. Hence we should be leaders in the cause, that we may grow into a healthier people.

just  
musin'...  
by josephine strode

## Negroes Need Adequate Hospitalization

The Negro's health problems have long been a topic of much discussion. It is a well known fact that in order to combat disease and give remedial care to the afflicted, adequate medical facilities which include physicians, surgeons, nurses, hospitals and clinics must be maintained. However, with all the lip service given to Negro health, so little has been actually done to secure better hospitalization for Negroes here.

Before launching into a discussion of this vital need among the 250,000 Negroes of Oklahoma, including those in Oklahoma City, I

*Courier*  
8-10-40 *Pittsburgh Pa.*

OCT 5 1940

*Black Dispatch*

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## Physician Explains Plan For Negro Psychopathic Hospital

DEC 13 1940

By Dr. W. L. Silcott

NASHVILLE, Tenn. — (ANP)—Through the medium of this column, the members and friends of the Negro race have previously been made acquainted with the pressing need for increased hospital facilities dedicated to the mental health of the race.

As a primary attempt to remedy existing deplorable conditions, the Committee for the Development of Psychopathic Hospitals and other Mental Hygiene Resources for Negroes was organized. It would seem fitting therefore that this article should set forth the nature and aims of this organization and how it may be contacted.

This committee had its inception a year ago at a meeting where prominent white and colored psychiatrists, psychologists and social workers discussed facts concerning the inadequate facilities now existing to prevent and treat mental diseases. The committee is also concerned with the development of normal, healthy mental attitudes so important to the upbuilding of a progressive race. Leading this movement are Miss R. A. Kittrell and R. R. P. Brennan of White Plains, N.Y.; Dr. R. Hernandez of Nashville and many others.

As the name implies, the organization centers around a movement to secure better psychiatric and mental hygiene resources for Negroes. No adequate facilities exist at the present time, even though the need has been long apparent. On the basis of such needs the committee contemplates two primary objectives:

(1) The establishment of a psychopathic hospital as a primary basis for the development of standards in psychiatric studies and treatment, and, (2) Development of mental hygiene movement both of its own values and as a body to give support to and to co-ordinate with the psychopathic hospital. In pursuit of these objectives it is necessary to consider the following important problems:

(1) The existing facilities; (2) the type of hospital to be organized.

Existing facilities: This naturally concerns itself with the following questions:

- A. *Kansas City, Mo.*
1. What hospitals admit Negro patients?
  2. What hospitals are staffed by Negroes?
  3. Where may a Negro physician get experience in psychiatry?
  4. What facilities exist for training Negro psychiatric nurses, social workers, psychologists, etc.?

- B.
1. Are there any mental hygiene committees related to parent-child education, child study, etc.?
  2. What efforts are being made to teach mental hygiene in schools and colleges?
  3. Do colleges have mental hygiene services for their students?

Type of hospital to be proposed: Three possibilities suggest themselves here.

1. Private hospital — maintaining itself with or without popular subscription.
2. State hospital.
3. Teaching (or psychopathic) hospital, a part of a medical school supported by grants and endowments, etc.

The type of hospital considered is that known as "psychopathic," the prototypes of which are the Boston Psychopathic hospital, the Colorado Psychopathic, etc. It is proposed that this hospital should be a part of a medical school for Negroes.

It should be a teaching institution for extensive study and treatment of recent and acute conditions, a clearing house for community and national mental problems. It should be active in the field of investigation and research; the teaching of medical students, nurses, social workers and psychologists. It should also maintain an out-patient department for the services of those who are not acutely ill.

### Would Spread Information

Finally, it should spread information intended to educate the general public in ways of developing personality equilibrium in a world that has become a stage in which races, instead of individuals, are the actors.

The committee will accept suggestions from individuals or groups

interested in racial upliftment. In turn it suggests that the challenge be accepted in accordance with the existing need. There is, therefore, no time for dilly-dallying. Opportunity is knocking.

Shall we let it slip by? Begin by organizing local societies in every community and communicate at once with Miss R. A. Kittrell, executive secretary, 266 Brookfield street, White Plains, N. Y.; Dr. T. P. Brennan, chairman, 52 Sterling avenue, White Plains, N. Y.; or Dr. R. Hernandez, treasurer, Elm Hill Road, Nashville.

## Bronze Mayors Seek Fund For A National Hospital

MEMPHIS Tenn.—(SNS)—

A fund-raising campaign to accumulate \$300,000 for the erection of a National Hospital for the treatment and cure of infantile paralysis patients among colored people, received new impetus last week when Mr. W. T. Brown, Jr., of Chicago, Illinois, Mayor's Association, made a hurried trip to Detroit, Michigan last Saturday to visit with Reuben J. Patton, Chairman of the Board of Directors of the Association and with Senator Charles C. Diggs, recently elected State Senator for his third term, relative to the project.

The National Colored Mayors Association, was first suggested and foresight of 'The Mayor of Beale Street', Mr. Matthew Thornton, Sr. who visited in the North and East last summer in the interest of organizing the various men who have been elected as 'Mayors' of 'Bronzeville,' and so forth, throughout the country among colored citizens, conscious of their restricted places in their various communities, and anxious to present united front in their effort to play the part of active and interested citizens.

In an exclusive interview with President Brown, it was revealed that he and Mr. Patton have been extended an invitation to visit with President Roosevelt in Washington after January 1, to discuss plans to house large numbers of paralytic victims among the colored race. He also stated: "This committee is planning to have a complete report ready for their next national convention of colored 'Mayors' which will meet in Louisville, Ky. three days before the 1941 Kentucky Derby."

President Brown, Chairman Reuben J. Patton and Senator Charles C. Diggs are pictured here signing valuable papers, making it possible to promote one of the largest benefits ever staged in the City of Chicago for the purpose of raising funds to help establish their hospital. Senator Diggs during the national convention of Colored Mayors on the first of August, administered the oath of office to the following executives, who were selected to head their association, affiliates

from the next two years; Pres. W. T. Brown, Jr., of Chicago, vice president, Secretary Mark Anthony of Louisville, Ky., Treasurer, Dr. McLean Morrison of Detroit, Michigan, and Chairman of the Board Reuben J. Patton of Detroit. Mayor Matthew Thornton, Sr., of Memphis, is a member of the Board of Directors of the Association.

# 'Mayors' Interested In Hospital Plan

DEC 17 1940



DETROIT—(SNS)—W. T. Brown, of Chicago, and president of the National Colored Mayors' Association, left, and Charles C. Diggs, Michigan senator, at right, look on as Reuben J. Patton, chairman of the board of directors of the Association, signs papers, making possible the erection of a \$300,000 hospital for the treatment and cure of colored infantile paralysis victims in the United States, a project which the Association is undertaking as one of its major activities.

# Negro Needs Psychopathic Hospitals Says Dr. Silcott

NOV 2 1940

By W. L. SILCOTT, M. D.

NASHVILLE.—(ANP)—From time immemorial man has sought ways and means of securing and insuring his peace of mind. We are told that the Epicureans worshipped at the temple of pleasure, the stoics developed a tolerance for the unpleasant, and that Plato built his philosophy around the inherent values of virtue; joy and pain being purely incidental. Primitive men resorted to magic and superstition, believing as he did that everything about him was possessed by spirits—good and evil.

*The Black*  
There are so-called civilized people of today who still have primitive ideas of mental disease. While willing to seek aid for minor physical ailments, they are reluctant to discuss their mental problems. This is particularly true of the Negro. There is small wonder then, that there are more beds in hospitals today given to the care of the mentally ill than to all other physical conditions combined. This is in direct accord with the statement made recently by a well known educator, "Last year there were more patients entering hospitals for mental illness than students graduating from our colleges."

*Dispatch*  
This raises the question: Is mental disease a medical or a community problem? It is both. Until this fact is brought home to our people, and until each contributes towards its prevention and control, mental disease will continue to be on the incline.

*Alabama City*  
The popular, but nonetheless erroneous belief is, that mental treatment is limited to the hopelessly insane. The truth is that as in physical health, treatment is aimed first at prevention. But as it sometimes becomes necessary to provide special hospital facilities for certain diseases (cancer, tuberculosis, heart disease, and the like), so it is at times necessary to make similar provisions for the mentally ill. Hospital facilities should be even more necessary for mental pa-

Besides, special accessories are needed to supply personality needs by way of recreation, education, and physiotherapy which may not be expected in the general hospital equipment. The general trend at present is to have a unit for mental treatment in close coordination with the general hospital so that the facilities of both may be utilized in treating the individual as a whole—body and mind. This is in accordance with the fact that whatever affects the body must of necessity disturb the mind.

The two great institutions concerned with the training of Negro physicians have already accepted the challenge in preparing to cope with the problem of mental diseases, and are expecting the communities to do their part. The fact that neither of these purely Negro schools has a unit of its own is unfortunate, for both teachers and students are handicapped in dealing solely with isolated cases. Furthermore, progressive students who are captivated by this fascinating subject and are willing to enlist in the crusade, usually have their enthusiasm dampened by the prospect of having to spend years in training only to find at the end little or no opportunity to practice what they have learned.

This same sad state of affairs has dulled the edge of Negro ambition in nearly every walk of

life. It should be hardly necessary to hope, therefore, that the movement now on foot to establish mental hygiene clinics for Negroes will receive from the race as a whole both moral and substantial support. The contributions of Meharry Medical college toward the general health of the Negro race have been recognized by prominent organizations interested in national health, among which is the Committee for the Development of Psychopathic Hospitals and other Mental Hygiene Resources for Negroes. This great organization will hold its next regular meeting at Meharry, Nashville, at which time it will study the opportunity for establishing and maintaining a mental hygiene center.

Mental hygiene seeks to prevent mental disease. It aims at attacking mental disease in its incipency, hence is deeply concerned with the wholesome mentation of children. Through the child guidance clinics, it reaches the juvenile delinquent, the problem child at home and at school, and spreads information concerning the amelioration of the pressing problems of life resulting from frustrations of the basal instinctive urges (hunger, sex, fear, etc.), and the right to life and the pursuit of happiness.

The Committee for the Development of Psychopathic Hospitals and other Mental Hygiene Resources for Negroes is interested in presenting to the general public the true facts concerning mental disease among Negroes, the inadequacy of hospital facilities and the utter neglect in which Negro patients find themselves once they are accepted in public institutions. There is great need for a private or semi-private center where Negro patients may receive the benefit of modern psychiatric care and where Negro physicians may learn more about the treatment of mental disease. This will be only possible through the generous contribution and moral support of all members of the race.

## Pass The Hospital Bill With Teeth

THE UNITED STATES Congress has before it a \$10,000,000 hospital building program measure which should have the diagnostic attention of every true American, and especially those of our group. The bill would provide the construction of hospitals, at government expense, "in rural districts and economically depressed areas. The South, being still mostly rural and possessed with a large number of economically depressed areas," is naturally more concerned than any other section of the country.

It was significant that at a subcommittee hearing on the bill Tuesday that a Chicago surgeon contended that the proposed hospitals be available to all patients or qualified doctors "without discrimination on account of sex, race, creed, color or religion." Also, that attention was called to the fact that epidemics start in the alleys but finish in the boulevards." The bill could not but benefit all Americans.

The country as a whole and the colored group in particular need more available hospitals. There is only one hospital bed available for every 2,000 colored Americans. There have been numerous cases where persons have died who might have been saved by proper attention, but who were denied it because of discrimination and lack of hospital facilities.

Statistics reveal that there are only 120 hospitals in the entire South serving the nine million colored Americans who live there. This is a woeful lack of a needed facility. Let the Congress give us more hospitals, where we need them, and let them be staffed by our own eligible doctors and nurses.

## Only 7,000 Hospital Beds Available For 15 Million Negroes of United States

Leaders Tell Of Minority Discrimination To Senate Committee

## Seek Changes In George-Wagner Bill

By A. E. WHITE

WASHINGTON.—(ANP)—If Negroes are to gain an consideration in the execution of the newly proposed George-Wagner bill known as the National Health bill they will owe it to the most careful, scientific and logical presentations of just about as fine a group as has ever appeared before any senate committee conducting hearings.

Included in the group were Dr. Carl Roberts of Chicago of the National Medical Association; Dr. E. R. Carney of Detroit, president of the National Hospital Association; Dr. Paul V. Cornelly of the Howard University Medical

of Wisconsin, and Wagner of New York, the brilliant parade of Negro witnesses related in telling manner the problems of the Negro under existing health conditions in the United States.

Monday's proceedings started it, however, when Dr. Morris Fishbein, erudite and militant leader of the American Medical Association, told the committee that if the truth were really known, the group which stood more greatly in need of hospitalization and assistance in the United States was the Negro group—a minority of 13,000,000 people.

That Dr. Fishbein should make this utterance was an indication of the cessation of long hostilities which had smoldered between the American Medical Association and the National Medical Association. It boded good for both groups, the white group which through its Southern members had sought to aid their colored professional brethren earlier.

And Dr. Roberts' testimony on the stand Tuesday indicated the support of the NMA for the bill, provided that Negroes were given consideration "conforming with the practices and customs of localities."

Dr. Roberts cited the history of the NMA and went into the problems of Negro doctors, who when taking patients to the majority of hospitals had to leave their patients at the door.

Among the telling points made by Dr. Roberts were those showing that in the entire United States there are available for the entire Negro population of the country only 7,000 beds, which means one bed to every 2,000 people compared with a total of 1,161,380 beds for the remainder of the population.

While the bill is aimed at the rural areas of the United States, there are similar problems in the urban centers, for as Dr. Roberts pointed out, the "rural problems of Mississippi become the urban problems of Chicago because of migration. And in Chicago, less than 3 per cent of the hospitals accept Negro patients and 2½ per cent of these are charity or teaching institutions and the proper ½ represents a Negro hospital."

Speaking of the Provident Hospital clinic, he says there are

derived through the passage of the bill, making such recommendations and changes as had previously been recommended by Dr. Dorothy Boulding Ferebee, the only woman physician testifying in the hearings. Dr. Ferebee told of the work of the Alpha Kappa Alpha sorority in sponsoring a health project in Bolivar county, Miss., where there is no public health facility and the Negro population is 71 per cent of the total population of the county.

Charles Houston discussed the legal aspects of the bill and urged its adoption with the corrections and recommendations outlined by the members of the medicinal profession.

The National Medical Association recommended the insertion of the words in several places, "without discrimination on account of sex, race, color or religion."

"The National Medical Association recommended the insertion of the words in several places, 'without discrimination on account of sex, race, color or religion.'"

"The National Medical Association recommends further that the

act should be broadened in such manner as the committee may deem fitting and proper to include subsidies or aids to existing hospital facilities where urgent needs are shown and satisfactory prospects exist for rendering unusual service in control of disease. With incorporation and adoption of the above recommendation, the National Medical Association approves Bill S-3230 (H. R. 8240)."

Under the present plan, the bill calls for an outlay of \$10,000,000 by the federal government to erect in the South such hospitals as are needed to carry out the health program indicated by the U. S. Public Health Service, with the hospitals to be administered by the local government.

## FIGHT FOR PASSAGE OF BILL

WASHINGTON, Mar. 21.—Through the chairman of their steering committee, Dr. Paul B. Cornely, the National Non-Partisan Council on Public Affairs placed at the door of the Senate last week the tragic fact that for one million Negroes there are only 65 hospital beds in the State of Mississippi. Dr. Cornely further stated that there is only one hospital bed for each 1,000 Negroes while there is one for each 110 whites, and there is one hospital for each 107,000 Negroes and one for each 19,000 whites.

Buttressing his testimony was Dr. Dorothy B. Ferebee, national basileus for the Alpha Kappa Alpha Sorority, who has for five years directed the health project of the Alpha Kappa Alpha Sorority in Mississippi, who related more facts that were equally startling. She told of the thousands of persons who have never seen a doctor or dentist; that more than 11,000 Negroes die from tuberculosis each year and that there are only 2,000 beds for their care in the South.

## \$60,000,000 FOR HOSPITALS

One of the most enlightened pieces of legislation passed by the U. S. Senate in a long time is the \$60,000,000 hospital construction program recommended by President Roosevelt.

The money is to be spent over a period of six years to build hospitals in various communities to be leased either to States or cities.

This program will provide an estimated 25,000 or 30,000 additional hospital beds primarily and chiefly in rural and "economically distressed areas."

Since assurances have been given that this money will be equitably distributed, the program will be one that will greatly benefit Negroes.

An amendment supported by Senators Robert F. Wagner (New York), W. Warren Barbour (New Jersey) and Walter F. George (Georgia) assures that the facilities provided by the bill will be available "without discrimination on account of race, creed or color."

Many communities with large Negro populations have at present no or inadequate hospital facilities for them.

This bill, on which the House is shortly to vote, will soon make it possible to hospitalize almost everyone who needs it. It is unfortunate that larger sums are not appropriated for humanitarian purposes.

No matter how great a military and naval machine this country may have, it will ultimately perish unless drastic steps are taken by the federal authority to better safeguard the health of its citizens.

The future of a country is not determined by the condition of those on top but by the condition of those on the bottom.

This truth is finally dawning upon quite a few people in this country.

## Medics To Hear Plans For 6 Negro Hospitals

WASHINGTON, Aug. 8—A sympathetic appraisal of the efforts of the Rev. Amos H. Carnegie, founder and executive secretary of the National Negro Hospital Foundation, to have six 100-bed hospitals for Negroes erected out of Federal funds will be made before the executive committee of the National Medical Association convention in Houston, Tex., this month, by Dr. C. Herbert Marshall, Jr., chairman of the local delegation.

The objective of Dr. Marshall's presentation will be the alignment of the medical profession behind the movement. He will also offer a proposal for the establishment of a hospital for mentally ill colored persons. The last named is sponsored by Dr. Ben Karpman, professor of psychiatry at Howard University and psychiatrist at St. Elizabeth's hospital.

Dr. Washington, a member of the Washington Medico-Chirurgical

## Senator Davis Urges Six Negro Hospitals

Washington, Aug. 8.—Construction of six 100-bed hospitals for Negroes in the South as part of the Federal Government's forthcoming \$60,000,000 hospital-building program, was urged by Senator James J. Davis (Rep., Pa.)

speaking over the Mutual Broadcasting System on Thursday night. Another speaker on the program was the Rev. Amos H. Carnegie, executive secretary of the National Negro Hospital Foundation, sponsor of the movement.

Senator Davis said in part: "I voted for the \$60,000,000 appropriation to build needed hospitals in the rural areas and economically depressed districts because I believe there is a great need for such a program."

### REQUEST IS MODEST

"Your request is a modest one and I believe you will get the hospitals. You need them. Nobody can deny that. There is no reasonable excuse that could be offered for your not getting them."

"The South," said the Rev. Mr. Carnegie, "is where 10,000,000 Negroes live and where the need for

## Davis Urges 6 Hospitals

(Continued from Page One)

adequate hospitalization of the Negro sick and hospital facilities for the training of colored physicians and nurses is woeful.

"Unless separate hospitals are built for the colored race, it will not be benefited by a hospital building program such as the Government is about to undertake."

He suggested that the hospitals be situated in Louisville, Ky., Memphis, Atlanta, Birmingham, Charleston, S. C., and Dallas.

## We Need Psychopathic Hospitals

By W. L. SILCOTT, M. D.  
Meharry Medical College

DEC 1-3-1940

Through the medium of this column, the members and friends of the Negro Race have previously been made acquainted with the pressing need for increased hospital facilities dedicated to the mental health of the race. As a primary attempt to remedy existing deplorable

conditions, the Committee for the Development of Psychopathic Hospitals and other Mental Hygiene Resources for Negroes was organized. It would seem fitting therefore that this article should set forth the nature and aims of this organization and how it may be contacted.

The Committee for the Development of Psychopathic Hospitals

### HOSPITAL PLANS DRAWN

Memphis Awaits Outcome of Bill Proposing Federal Aid  
If the proposed \$60,000,000 Federal hospital aid appropriation is adopted by Congress, Memphis has plans drawn for a hospital that will fit requirements of the bill under consideration. Mayor Chandler said yesterday.

It is the new building on the Dunlap Street frontage of John Gaston Hospital grounds, intended for a Cripple Negro Hospital. If Federal money is obtained, it would be a negro hospital with a wing for treatment of cripples.

and other Mental Hygiene Resources for Negroes had its inception a year ago at a meeting where prominent white and colored psychiatrists, psychologists and social workers discussed facts concerning the inadequate facilities now existing to prevent and treat mental diseases. The Committee is also concerned with the development of normal, healthy mental attitudes so important to the upbuilding of a progressive race. Leading this movement are Miss R. A. Kittrell and Dr. T. P. Brennan of White Plains, N. Y.; Dr. R. Hernandez of Nashville, Tennessee and many others.

As the name implies, the organization centers around a movement to secure better psychiatric and mental hygiene resources for Negroes. No adequate facilities exist at the present time, even though the need has been long apparent. On the basis of such needs the Committee contemplates two primary objectives: (1) The establishment of a psychopathic hospital as a primary basis for the development of standards in psychiatric studies and treatment and, (2) Development of a mental hygiene movement both for its own values and as a body to give support to and coordinate with the psychopathic hospital. In pursuit of these objectives it is necessary to consider the following important problems:

(1) The existing facilities; (2) the type of hospital to be organized.

Existing facilities: This naturally concerns itself with the following questions—  
1. What hospitals admit Negro patients?

2. What hospitals are staffed by Negroes?

3. Where may a Negro physician get experience in psychiatry?

4. What facilities exist for training Negro psychiatric nurses, social workers, psychologists, etc.?

B. 1. Are there any mental hygiene committees related to parent-child education, child study, etc.?

2. What efforts are being made to teach mental hygiene in schools and colleges?

3. Do colleges have mental hygiene services for their students?

Type of hospital to be proposed: Three possibilities suggest themselves here.

1. Private Hospital—maintaining itself with or without popular subscription.

2. State Hospital.

3. Teaching (or psychopathic) hospital, a part of a medical school supported by grants and endowments, etc.

The type of hospital considered is that known as "psychopathic" the prototypes of which are the Boston Psychopathic Hospital, the Colorado Psychopathic, etc. It is proposed that this hospital should be a part of the medical school for Negroes. It should be a teaching institution for extensive study and treatment of recent and acute conditions, and a clearing house for community and national mental problems. It should be active in the field of investigation and research the teaching of medical students, nurses, social workers and psychologists. It should also maintain an out-patient department for the services of those who are not acutely ill. Finally, it should spread information intended to educate the general public in ways of developing personality equilibrium in a world that has become a stage in which races, instead of individuals are the actors.

The Committee will accept suggestions from individuals or groups interested in racial upliftment. In turn it suggests that the challenge be accepted in accordance with the existing need. There is therefore no time for dilly-dallying. Opportunity is knocking. Shall we let it slip by? Begin by organizing local societies in every community and communicate at once with Miss R. A. Kittrell, executive secretary, 266 Brookfield St., White Plains, N. Y.; Dr. T. P. Brennan, chairman, 52 Sterling avenue, White Plains, N. Y., or Dr. R. Hernandez, treasurer, Elm Hill Road, Nashville, Tennessee.

W. L. Silcott, M. D.

# PWA SHOWN TO HAVE AIDED HOSPITAL PLAN

## 5,838 More Beds Made Available Through Administration

WASHINGTON, D. C., Jan. 12—At least 5,838 new beds have been made available for Race patients in hospitals throughout the country through the aid of grants and loans by the Public Works Administration, according to a recent report made to Col. E. W. Clark, acting commissioner of the Public Works Administration by W. J. Trent Jr., adviser on Negro affairs.

Fifty-nine and seven-tenths per cent, or 3,486 beds provided are for the insane; 25.2, or 1,469, in general hospitals; and 15.1, or 883, in tuberculosis sanatoria and other hospitals.

The facilities range from seven ward buildings accommodating 1,170 patients at the North Carolina State Hospital for the Insane at Goldsboro, N. C., to a five-bed ward at the Municipal general hospital at Quitman, Ga.

These hospitals are distributed throughout 17 southern and border states. The figures given are minimum estimates only, due to the impossibility of discovering from numerous applications whether facilities are being provided for Race patients. In addition, no information can be secured concerning hospitalization for the Race in those hospitals which include facilities to all people regardless of race without separate quarters.

An analysis of location of beds in general hospitals indicates that there is a noticeable tendency for more and more beds to be made available to Race patients in the hospitals in the smaller towns and rural sections of the South.

One of the largest and most modern hospitals erected for Race patients during the past five years with the aid of PWA funds is the Homer G. Phillips municipal hospital, St. Louis, Mo.

This modern, fireproof hospital which cost over \$3,000,000 has a capacity of 685 beds. It is composed of five buildings—a service building, administration building, two ward buildings and a nurses' home and training school. The nurses' home provides dormitories for 146 nurses and 24 internes.

Another municipal hospital for Race patients was recently dedicated at Norfolk, Va. This hospital, the Norfolk Community hospital, has a bed capacity of 54 and cost approximately \$100,000. It replaced two badly over-crowded, frame buildings which constituted a dangerous fire hazard.

In addition to these non-federal hospital projects which provided beds for Race patients, PWA recently made a grant of \$700,000 to Freedmen's hospital in Washington, D. C., for the purpose of erecting a tuberculosis annex. The building is three stories and has a capacity of 150 beds.

It is expected that this annex will be of great value in the training of doctors in the latest developments in the treatment of tuberculosis.

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## 5,838 New Hospital Beds Available to Negro Sick

WASHINGTON.—At least 5,838 new hospital projects which provided new beds have been made available for Negro patients, PWA recently made a grant of \$700,000 to Freedmen's hospital in Washington, D. C. for the purpose of erecting a Tuberculosis Annex. The building is three stories and has a capacity of 150 beds. It is expected that this Annex will be of great value in the training of Negro doctors in the latest developments in the treatment of tuberculosis.

Fifty-nine and seven-tenths per cent, or 3,486 beds provided are for the insane; 25.2, or 1,469, in general hospitals; and 15.1, or 883, in tuberculosis sanatoria and other hospitals. The facilities range from seven ward buildings accommodating 1,170 patients at the North Carolina State hospital for the Insane at Goldsboro, N. C., to a 5-bed ward at the Municipal General hospital at Quitman, Ga.

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In addition to these non-Federal hospital projects which provided new beds have been made available for Negro patients, PWA recently made a grant of \$700,000 to Freedmen's hospital in Washington, D. C. for the purpose of erecting a Tuberculosis Annex. The building is three stories and has a capacity of 150 beds. It is expected that this Annex will be of great value in the training of Negro doctors in the latest developments in the treatment of tuberculosis.

## Estimated New Beds For Colored Patients

WASHINGTON, D. C.—Estimated 5,838 new beds for colored patients in hospitals located in 17 southern and border states, made possible through PWA grants and loans, according to a report of W. J. Trent, Jr., PWA advisor on Negro affairs follow:

Location	For colored No. of beds	Location	For colored No. of beds
ALABAMA		NORTH CAROLINA	
Birmingham, general .....	80	Dunn, general .....	5
Northport, insane .....	248	Oxford, general .....	10
ARKANSAS		Wilmington, general .....	40
Benton, insane .....	400	Black Mountain, tubercular ..	50
FLORIDA		Sanatorium, tubercular .....	127
Melbourne, general .....	7	Tarboro, tubercular .....	10
Orlando, tubercular .....	88	Goldsboro, insane .....	1170
Chattahoochee, insane .....	410		
Raiford, women's prison .....	43	SOUTH CAROLINA	
GEORGIA		Aiken, general .....	8
Athens, general .....	22	Greenville, general .....	20
Lagrange, general .....	14	Laurens, general .....	8
Moultrie, general .....	10	Rock Hill, general .....	22
Quitman, general .....	5	Summerville, general .....	18
West Point, general .....	10	State Park, insane .....	640
INDIANA		TENNESSEE	
Indianapolis, general .....	82	Memphis, general .....	140
KANSAS		TEXAS	
Kansas City, general .....	34	Dallas, general .....	43
KENTUCKY		El Campo, general .....	14
Lexington, tubercular .....	40	Ft. Worth, general .....	35
LOUISIANA		Galveston, general .....	90
New Orleans, general ....	unknown	Sweetwater, general .....	8
MARYLAND		Tyler, general .....	13
Henryton, tubercular .....	273	Austin, tubercular .....	20
Crownsville, insane .....	90	VIRGINIA	
MISSISSIPPI		Lynchburg, general .....	15
Indianola, general .....	8	Norfolk, general .....	53
MISSOURI		Burkeville, tubercular .....	100
St. Louis, general .....	685	Petersburg, insane .....	112
St. Louis, insane .....	200	WEST VIRGINIA	
		Pocahontas, tubercular .....	100

# PWA Opens 5,838 Beds in Seventeen Southern States

WASHINGTON, D. C.—At least 5,838 new beds have been made available for colored patients in hospitals throughout the country through the aid of grants and loans by the Public Works Administration, according to a recent report made to Col. E. W. Clark, acting PWA commissioner, by W. J. Trent, Jr., adviser on Negro Affairs. Fifty-nine and seven-tenths per cent, or 3,486 beds provided for the insane; 25.2, or 1,469 in general hospitals; and 15.1, or 883, in tuberculosis sanatoria and other hospitals. The facilities range from seven ward buildings accommodating 1,170 patients at the North Carolina State Hospital for the Insane at Goldsboro, to a 5-bed ward at the Municipal General Hospital at Quitman, Ga.

## LOCATED IN 17 STATES

These hospitals are distributed throughout seventeen southern and border States. The figures given are minimum estimates only, due to the impossibility of discovering from numerous applications whether facilities are being provided for colored patients. In addition, no information can be obtained concerning hospitalization for colored in those hospitals which include facilities to all regardless of race without separate quarters.

An analysis of location of beds in general hospitals indicates that there is a noticeable tendency for more and more beds to be made available to colored patients in the hospitals in the smaller towns and rural sections of the South.

## PHILLIPS COST \$3,000,000

One of the largest and most modern hospitals erected for colored patients during the past five years with the aid of PWA funds is the Homer G. Phillips Municipal Hospital, St. Louis, Mo.

This modern, fireproof hospital which cost over \$3,000,000 has a capacity of 685 beds. It is composed of five buildings—a service building, administration building, two ward buildings, a nurses' home and training school. The nurses home provides dormitories for 14 nurses and 24 internes.

Another municipal hospital for colored patients was recently dedicated at Norfolk, Va. This hospital, The Norfolk Community Hospital, has a bed capacity of 54 and costs approximately \$100,000. It replaced two badly over-crowded frame buildings which consti-

tuted a dangerous fire hazard.

In addition to these non-Federal hospital projects which provided beds for colored patients, PWA recently made a grant of \$700,000 to Freedmen's Hospital in Washington, D. C. for the purpose of erecting a tuberculosis annex. The building is three stories and has a capacity of 150 beds. It is expected that this annex will be of great value in the training of colored doctors in the latest developments in the treatment of tuberculosis.

## Needs Race Discussed At State Meeting

WASHINGTON —(ANP)— At a state-wide conference held at Raleigh, N. C., on the Better Care for Mothers and Babies, one of the finest papers was the reading of Dr. Walter J. Hughes of the North Carolina State Board of Health, later published by the U. S. Department of Labor, Children's Bureau. "A discussion of the Negro's needs as a 'discriminated one,'" the paper reads. "The welfare of Negro mothers and babies is dependent upon their social and economic background. This background cannot be expressed as a single function, for it has many ramifications. Generally speaking, a Negro mother's needs are human ones. Her educational, social and economic status, however, renders them more acute. Therefore, to know her needs there must be an interpretation and appraisal of all the forces that contribute to her life. The health and welfare of the child are wrapped in the health and well-being of the mother. Hence the care of this whole problem is the mother. The physical fitness of the infant she is to bring into the world and his normal development in the first years of life are largely dependent upon her intelligence and economic conditions. Her first need is education in personal and community hygiene and the principles of healthy living, in infant hygiene and infant feeding, in training the infant in health behavior in the need for immunization against the preventable diseases, and in the intelligent utilization of physicians, hospitals, and clinics. This education should

be both intensive and should be extended even down to the girls in high school, for every girl is a potential mother.

## SECOND NEED

"The second need is to improve her economic status. Morbidity and mortality have always traveled the roads of ignorance and poverty. The sanitary, social and economic status of a people is reflected in their infant mortality. The community existed long before the infant, but the mother is a product of the environmental conditions of the community. Traditional status and low income are important deterrents to the welfare of mother and baby. When the Negroes' social and economic status measures up to that of other persons, there will be equality of maternal and infant care.

"The poverty of the Negro mother is a health hazard not only to her but to her unborn child. She is forced to work until the very hour of her confinement. Quite frequently a week after confinement to gain the bare necessities of life. These mothers, undernourished, poorly housed, overworked, inadequately paid, and sometimes in the throes of tuberculosis, nephritis, heart disease of syphilis, go on bringing more babies into the world to be brought up undernourished, pale and anemic and without a fair chance in life.

## THIRD NEED

"The third need is communication and transportation. At present this presents no great problem to the urban Negro, but it does present a serious problem to the rural Negro. He lives off the highway, even away from the byways. He has no telephone communication; his means of transportation are too meager to be of value when the need is most urgent. Effective means of transportation and rapid communication are essential to obstetric service. How many mothers and babies perish for lack of these facilities, is hard to estimate.

"Improve obstetric and pediatric service is certainly one of the most urgent needs. Modern methods are just as essential to Negroes as to any other persons.

"From the years 1933 to 1937 inclusive, of the 113,647 Negro infants born, 31 percent were delivered by physicians and 69 per cent by mid-

wives. While it is desired and imperative that modern facilities used by trained physicians should be utilized by Negro women, it is one of the tragedies of modern civilization that the obstetric practice for Negro women is largely in the hands of midwives and will be for 25 years to come—probably for 50 years. Therefore, from the public health standpoint, we must make the most of the facilities that we have at hand.

"There must be rigid supervision of the midwives by the health departments and the midwives must be trained as far as possible in what to do and—even more important—in what not to do. They must be trained in personal hygiene and their own health must be supervised.

"Finally, it is not the woman of means who presents a maternal and infant problem in public health. It is the woman of destitution. It is, therefore, our duty to get these women into clinics for prenatal and postnatal care, to bring to them newer methods in scientific care, to educate and hold them after we get them. But we cannot hold them unless the members of the clinic staff have sympathy, understanding and kindness.

"Probably I have presented a dismal picture of the Negro's plight—but let all who would look down upon them turn back 30 years to the record of maternal and infant mortality in their own groups, and they will find that they stood where we stand today.

"Let us not lay this problem on the backs of any particular people; it is a problem of the state and its elimination will come through the vision not of a white eye nor a black eye, but of a human eye."

## NO GUARANTEE FOR RACE IN PROPOSED LAW

30 Organizations Open Drive To Assure Race Of Participation

WASHINGTON, March 15 —Thirty national organiza-

tions launched a drive last week to protect the interests of the Race in the National Hospitalization Act now under consideration by Congress.

The bill, designed to put hospitals in economically depressed areas of the southland at the government's expense, has no provisions which safeguard the interests of the Race.

Charles H. Houston, special counsel for the National Association for the Advancement of Colored People will testify before a Senate subcommittee for the proposed plan March 18.

It has been pointed out that Race members have the worst health conditions of any other group in America. Statistics show that although they have one-tenth of the population they get one-thirtieth of the hospital space; there is one hospital bed for every 150 white persons and one bed for every 2,000 Race members and that there are only 120 hospitals in the entire south serving nine million members of the Race. Every one knows of some specific case where some one died or suffered unduly because of discrimination and lack of hospital facilities in the south. Perhaps the most outstanding of these cases resulted in the death of Juliette Derricotte, late dean of women at Fisk university, who was making a trip from Nashville, Tenn., to Atlanta, Ga., and met with a serious automobile accident. After trying to get treatment in several hospitals and being refused, she at last received treatment in the basement of a hospital, but too late to save her life.

In spite of this appalling situation, there is nothing in the bill that provides for an equitable distribution of the funds proportionately to the health needs of Race members; nothing which provides that Race physicians be allowed to follow their patients into hospitals; that Race nurses and personnel be provided; nor for the equalization for services rendered.

Dalton, Ga. News  
December 24, 1940

DEAR SANTA CLAUS:

The colored people of Dalton will permit. We have about the same ills, aches and pains as our good white friends, and are, perhaps, more subject to their contraction. You are mighty good about coming to see white children and the colored children, and we know that you would be glad to help the colored people with this project.

Some of our white friends have been interested in helping us to figure out some way that we could have a hospital for the colored in Dalton, but nothing definite has been worked out, and in the meantime our people continue to suffer from the lack of hospital facilities.

We would appreciate it if you would call the attention of the mayor and council and our white friends throughout the city to the following resolution recently adopted by the colored civic club of Dalton.

TO THE CHAMBER OF COMMERCE  
DALTON, GEORGIA  
GENTLEMEN:

We, the colored Civic Club of Dalton, are addressing this appeal to you, with the request that you favorably consider the same and give it proper direction.

We have been accused of being imitative and perhaps that is true—at least we have seen wonderful comforts, benefits, and conveniences of the Hamilton Memorial hospital and we desire to imitate our white friends to the extent of having similar accommodations, which we cannot enjoy without your aid and assistance.

We compose only a small percent of the wonderful population of Dalton, but what we lack in numbers we endeavor to approximate in quality of law abiding citizenship; that we are industrious we submit for your decision. We endeavor to own, where possible, our humble homes, but we have been unable, economical as we may be, to accumulate bank accounts. However, we join in modest way to all ap-

peals, as far as our limited means will permit. We have about the same ills, aches and pains as our good white friends, and are, perhaps, more subject to their contraction.

When our loved ones languish on a bed of pain and sickness, we petition you to provide a place of hospitalization. We will do what we can and we ask you to do something to provide this great blessing for our people when they are sick.

"Inasmuch as you have done it unto one of the least of these, you have done it unto me." We know that you will do what you can for us—please help us!

COLORED CIVIC CLUB OF  
DALTON.

Clifford Morris President  
Charlie Maxwell, Secretary  
Harold Walker, Chairman of Board

Willie Trimmier  
Josh Love  
Zack Thompson  
Arthur Quinn  
George Bell, Directors.

## HOSPITALS- 1940

Atlanta Journal  
January 9, 1940

# Oden in Plea For Speed on Asylum Houses

## Toying With Life, He Says in Pointing To Building Hazards

The danger of a catastrophe confronts both white and colored patients at the state hospital for the insane at Milledgeville, Supt. John W. Oden reported to the State Board of Public Welfare Tuesday.

Dr. Oden said that while some of the new construction at the hospital is progressing rapidly, other work and needed repairs are moving slowly.

"The addition to the Jones Building is progressing slowly as well as the repair work on the male receiving building," Dr. Oden wrote the board. "For awhile, both of these jobs seemed to have gained some momentum."

"It is most urgent that the Green Building and the wings to the Powell Building be abandoned as early as possible. In continuing to occupy these two structures that have already been condemned, we are actually toying with the lives of our patients."

### Hazard Must Be Met

"Horrible conditions exist in the Negro department. A report of this has previously been made. The toilets, dormitory floors and the roofs of all the buildings, except the new Negro building, completed about 1928, are hazards that must be met shortly. Repairs on these buildings is going on in a small way. We are using all available funds to eliminate a catastrophe in the Negro department."

Dr. Oden recommended to the board the establishment of at least six mental clinics in various parts of the state. He said that many patients outside the hospital might be cured without being hospitalized if they could be examined promptly.

"This is the humane and economical way of handling this situation," Dr. Oden said. "We must

make every effort to keep sufficient vacancies in the institution to admit those patients who are young, violently insane, confined to jail, and who hold out hope of being benefited by early treatments."

### Thirty Deaths in Month

The report showed 8,331 patients on the rolls during November, 1939, of whom 7,089 were in the hospital and 1,130 on furloughs. There were 103 admitted during the month and 101 discharged. Of those discharged 171 were listed as recovered, 35 as improved and 11 as unimproved.

Thirty-eight patients died during the month, eight from arteriosclerosis, seven from tuberculosis and six from bronchial pneumonia.

### Macon, Ga., Telegraph

February 10, 1940

## Care for Negro Patients

Recent increase in the capacity of St. Luke's hospital for colored people, headed by Dr. C. W. Dyer, has served to call attention to the excellent work being done by this institution under the capable guidance of its president and to the larger field of service which is being undertaken.

It ought not to be necessary, in this day and time, to emphasize the importance of safeguarding the future in every way possible, whether it be as to health or the necessities of life. Group insurance in various forms and for many purposes has been gaining in popularity in late years and it cannot be too warmly commended.

Dr. Dyer has worked out a system which insures a reasonable amount of hospitalization at St. Luke's at a cost which is within reach of large numbers of our Negro population and if the advantages were more widely known we feel sure that it would be to the benefit of all concerned.

It is well known that both the white and colored wards of the Macon hospital are always overcrowded with patients in the low income groups and extension of facilities such as St. Luke's stands ready to provide tends to relieve the congestion in the city's institution.

Dr. Dyer offers a hospital service contract at \$5 a year for the individual subscriber and for a total fee of \$15 annually hospitalization is provided for a dependent wife or husband and children under 18 years of age living at home.

The services furnished include the usual hospital accommodations in a ward bed, on

## GEORGIA

recommendation of a physician or surgeon, for a period not exceeding 21 days within one year following the date of the contract. The patient would receive board, services of an intern, general nursing and routine laboratory work. Maternity cases are included after 12 months from the date of the contract and first-aid treatment is given in case of accident.

If the subscriber desires more private accommodation it may be obtained by paying the difference between the day rate for a ward bed and that of the accommodation selected.

Naturally, the facilities of the hospital, under this plan, are not available for the treatment of cases covered by workmen's compensation or employers' liability laws, nor are extreme mental and nervous cases admitted.

The foregoing is not to be taken as covering all the details, but gives some idea of the general plan and how easily the service can come within the means of a large number of subscribers.

Many of the most prominent physicians among the white people have endorsed the hospital, its strict observance of sanitary regulations and sterile conditions for surgical operations, while they pay equal tribute to the character and ability of Dr. Dyer.

It is well known that the record of sickness and death is higher in the colored group of Macon, as of most communities, than among the whites, but general conditions of health have their bearing on the white and colored population alike.

The larger the number of subscribers to a plan like this the smaller the unit cost, at least in theory, and the more efficient the service, so it would be gratifying to find that Dr. Dyer is receiving the widest co-operation and support.

Atlanta, Ga. Journal

March 2, 1940

## Regents Will Ask For State Infirmary

A committee of students from the University of Georgia appeared before Georgia's Board of Regents, meeting Friday at the Georgia Evening College, to urge the need of added infirmary facilities at the University, and the board agreed that the 1941 legislature would be asked for new and additional hospital provisions throughout the University System.

The present financial condition of the board was described as "acute," making immediate improvements impossible, the members stated. They recognized that infirmary services are inadequate at the University of Georgia and at a majority of other institutions in the system.

The regents adopted a resolution congratulating Chancellor S. V. Sanford for efforts in obtaining a half-million dollar gift from the Rosenwald Fund for the University System. The system will receive this year about 60 per cent of the \$1,750,000 appropriated for its operation. The board's next meeting will be held in its new quarters in the Georgia Capitol.

# Johnson Memorial Hospital To Observe Anniversary

**BAINBRIDGE INSTITUTION FOUNDED THREE YEARS AGO BY DR. J. H. GRIFFIN**

Bainbridge, Aug. 10—The Johnson Memorial Hospital will celebrate its third anniversary with a program at the Decatur County courthouse August 29 at which time Dr. E. W. Weaver, president of the Georgia Medical association, will be the principal speaker. There will be other speakers on the program, among them Miss Montine D. Hawthorn of Cairo.

After the program a brief period will be given to free examinations to those who wish them. Johnson Memorial Hospital was founded by Dr. J. H. Griffin and dedicated to the memories of Dr. James W. and Mrs. Lula Cooper Johnson, pioneer citizens of Bainbridge and Decatur county and parents of Mrs. J. H. Griffin.

The hospital was opened on August 26, 1937, with impressive ceremonies. 512 operations have been performed from October 3, 1937 to August 6, 1940. 344 admissions have been made within the same period. Five states are represented in its admittances, as follows: Alabama, Florida, Georgia, New Jersey, and

17 years has attended the John A. Andrews Clinical Society at Tuskegee Institute, has done post graduate work at the Cook County Hospital, Chicago, has been selected by the Rosenwald Foundation for three summers to do postgraduate work and has attended Medical lectures at Emory Medical School, Atlanta.

Miss Blanche V. Cambell who has been in the employment of Dr. Griffin for 16 years is the business manager and superintendent. Miss D. C. Irving of Richland, graduate of the Columbus City Hospital School of Nursing, is superintendent of Nurses and Instrument Nurse Miss Estella Johnson, also a graduate of the Columbus City Hospital School of Nurses, is night supervisor.

Mrs. Andru Grimes is anesthesiologist, and Miss Ida Mitchell and Mrs. Essie Conyers are student nurses, Miss Mary Louise Griffin, Asst. business manager; D. J. Griffin, a junior in Meharry Medical College, Asst. to Doctor Griffin; Dr. M. B. Hutto, Dental Surgeon; Dr. E. A. Lord, consultant; and Dr. E. A. Lord, consultant.

**Building for  
the Constitution  
Tuberculars  
Most Modern**

**132-Acre Site Adjoins  
Campus of Old Institution.**

Five huge units, including three H-shaped housing buildings, a smaller T-shaped structure, and one of the most modern tubercular units in America compose the new Milledgeville State hospital, which will be dedicated formally today.

Situated on 132 acres of land which already belonged to the state and were acquired by the State Hospital Authority at low

cost, the buildings adjoin the campus of the old hospital so that the medical and supervisory force will have little traveling to do.

Each unit is several stories in height. The H-buildings are each about 300 feet wide by 300 feet long, while the tubercular unit is more than 600 feet wide, with a total depth of more than 350 feet.

## Housing Capacity.

Building No. 1 will house 310 male patients and four attendants, buildings Nos. 2 and 3 each will care for 620 male patients and eight attendants, while building No. 4 will house 620 female patients and eight attendants.

In the four buildings are 50 "special purpose" rooms for supervisors, doctors' offices and treatment of patients.

The tubercular hospital consists of three separate wings, each three stories high. Wing "A" will house 210 white male patients, wing "B" 210 white female patients, and wing "C" will have two parts, one for Negro males, the other for Negro women. It, too, will care for 210 patients. The unit will have rooms for 18 nurses and attendants, as well as 16 rooms for doctors' office quarters, and six offices for treatment.

## Water Supply.

Water will be supplied from a complete system connecting all buildings. A 200,000-gallon tank atop a 150-foot tower will preserve a reserve supply in case of fire. A main connected with the enlarged waterworks plant of the old hospital will supply regular water. A new sewer system providing adequate waste disposal also has been built, and operates through three trunk sewer systems. All will empty into the Oconee river, which forms a method of disposal that has been approved by the State Health Department.

Treated wooden poles will carry wires for the electric light, telephone and fire alarm systems. Lighting power will come from the old hospital, and the central switchboard of the fire alarm system is in the existing administration building.

## Gas for Cooking.

Natural gas will be used for cooking in all kitchens. A main on the old hospital campus will connect at the property line with the new system built by the State Housing Authority. A new boiler plant also has been constructed, and contains three boilers. From here, a system of steam piping is carried in concrete tunnels to each of the five new buildings, for heating water and steam tables throughout the year, and for heating living quarters in winter.

Paved roads, with concrete walkways, curbs and guttering,

will connect the new hospital's units. The buildings also will have the most modern basic furniture and equipment, including kitchen equipment, ranges, steam tables, food trucks and such hospital equipment as sterilizers, fluoroscopes, operating tables and X-ray equipment. Steel and iron bedroom furniture will be virtually indestructible.

## Safety Considered.

Care has been taken to protect patients from accident and fire hazard, and to make their accommodations as sanitary as possible. To avoid injuries on stairways wherever possible, a dining room is provided on each floor of each wing, thus making 34 dining rooms in all. Most of these will be operated on the cafeteria system.

Safe bathing and toilet facilities also are provided in rooms having tile walls and floors which can be washed down with hose. All water valves are so locked and located that only attendants can control them. Hot water supply lines have control valves which keep the water below scalding temperature, thus preventing patients from drowning or burning themselves. A steam-warmed storage tank in

## Facts and Figures On New Hospital

To give an idea of the size of the new Milledgeville State hospital project, here are a few facts and figures:

The floor area of the buildings covers more than 15 acres.

There are 3 1-8 miles of corridors.

The buildings have 21 elevators for quick service.

Concrete used in framework and floors required 210,000 sacks of cement, 33,000 tons of sand 36,000 tons of gravel and more than 2,800,000 pounds of reinforcing steel. Altogether, it made 243,000 cubic feet of concrete, enough to build a standard sidewalk from Milledgeville to Atlanta.

There are 3,000,000 bricks in the building, more than 1,000,000 pieces of tile (enough material for 500 six-room houses) and 170,000 panes of glass, held in place by 750,000 pounds of putty.

each basement will supply warm water at all times.

## Radiators Used.

Steam radiators will be used on all but the fourth floors, where violent or disturbed patients will be quartered. Heat there will be provided by a forced draft hot air system, distributed through ceiling vent opening outside of the patients' reach. Radiators, where used, will have special grilles so patients cannot injure themselves.

Lighting fixtures are recessed in ceilings, and covered with flat glass plates that can only be removed by attendants. Projections have been avoided in the construction of rooms and wards, and even window sashes are of a special type which vent out in small sections. Window openings are covered by wire screens.

At patients respond better to treatment when kept in groups, as many small wards as possible have been provided. Single rooms, however, are provided on all floors. All foundations and framework are of concrete, reinforced with steel. Stairways, too, are of concrete and are enclosed by fire walls. Doors are of metal, or are metal-clad.

**DEC 6 1940  
Wiring Protected.**

Interior electric wiring has been protected, and frequent fire alarm boxes are provided, for the protection of inmates rather than for building protection. Fire hydrants have been installed adjacent to all buildings, and toilets will adjoin all day rooms.

All toilet rooms are provided with laundry chutes.

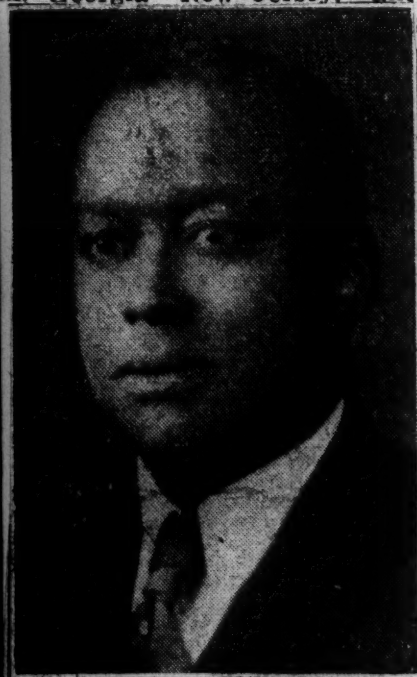
The tubercular hospital will be the largest single project, and is set on a hilltop surrounded by pine trees and remote from other buildings. A partial fourth floor in the center wing provides space for light, airy operating rooms.

The hospital is equipped with X-ray apparatus, fluoroscopes, operating tables, and sterilizing equipment, as well as with special equipment and pneumothorax treatments and rib removals.

## Tunnels Connect.

Wings are arranged in a hollow square, and a central kitchen to serve all three buildings is at the center of the inner court. It is connected with the buildings by concrete tunnels through which food trucks can be pushed to elevators serving all floors in each building. The trucks will be heated, so food never will be cold. The tunnels, also, will provide access to doctors going from building to building.

At the end of each floor is a screened porch to provide a maximum of fresh air. A small thickness of cork insulation will protect patients on top floors from excess summer heat. The tubercular hospital group alone costs more than \$1,000,000.



DR. J. H. GRIFFIN

Ohio.  
The personnel of the hospital is: Dr. J. H. Griffin, surgeon for

*Atlanta Daily World*  
*7-19-40 At Last Atlanta, Ga.*

Atlanta, Ga. Journal  
 July 11, 1940

## Atlantians Open Drive For Hospital for Negroes

A movement to build in Atlanta a 100-bed hospital for Negroes and to initiate a widespread program of hospital insurance, principally to benefit the Negroes of rural areas, was under way Thursday following a meeting of local civic leaders interested in the project.

At a meeting Wednesday it was pointed out that there are only 611 hospitals beds in Georgia for the state's population of 1,120,000 Negroes—or, only one hospital bed for each 1,835 Negroes. The proposed hospital would call for an initial expense of around \$250,000, according to leaders in the movement, who said it was the plan to add to the institution as the needs and funds progressed.

Two committees were organized Wednesday by a score of local leaders including Robert F. Maddox, Nat Long, I. M. Sheffer and Kendall Weisiger. It was decided to appoint two committees within the next few days, one to gather data on the need for Negro hospitalization in Georgia and the other to seek ways and means of financing the building and maintenance of the proposed institution.

It was pointed out that a ready-made hospital similar to the one proposed for Georgia are in operation in New Orleans, Birmingham, Winston-Salem, Baltimore and St. Louis.

According to the plan of the Atlanta sponsors of the project, fees of the hospital would be paid through hospitalization insurance, although it was said that "five or six years" will be required for this type of insurance to make headway among Negroes of the state. Completion of the hospital is expected long before that time.

**Would Have Regular Staff**  
 Leaders in the movement said 40 beds in the proposed hospital would be devoted to private and semiprivate patients, while 60 beds would be in wards. The hospital would be served by a regular staff of physicians.

Its proposed location has not been decided upon, nor have means of securing funds for the building, according to the sponsors, who say that a number of conferences will

follow soon to work out these problems.

The hospital was described as "a state-wide" project, with its principal purpose being for rural Negroes, who at present have access to virtually no type of hospitalization.

Gainesville, Ga., Eagle  
 July 25, 1940

## Jury Seeks Colored Unit For Hospital

### Jury Declares Addition Will Be Self-Supporting

Construction of an additional six-unit building for colored patients at the Hall County Memorial hospital was the high point of the recommendations of the grand jury when the presentments were read before Judge T. S. Candler in Hall Superior court Wednesday.

The recommendation goes on to say that the new unit would be self-supporting, according to the hospital authorities.

The jurors also recommended that the Gainesville district be furnished with separate registration lists "for each voting place, viz: Gainesville, New Holland, Gainesville Mill and Chicopee, and that each list contain only the names of those registered to vote in their respective precinct."

Without exception, the committees appointed to investigate the various county offices and properties found them to be satisfactory, and even deserving of praise.

The law enforcing agencies were urged to do all within their power to prohibit the carrying on of business on Sunday, except when permitted by law.

The tax receiver was asked to secure more "detailed returns, listing

separately each piece of land, showing exact location, acreage, and if any sales made, full information be given thereof."

Dr. Lee Rogers, county physician, declared that the addition would not cost the county \$1,000. It

would be erected to the rear of the present building and connected to it by means of a ramp.

Facilities would be provided for the care of three men and three women.

The presentments are published in full elsewhere in this issue.

NOTHING IS MORE GRATIFYING than the indication that Atlanta has been named as one of the pivotal hospital centers for colored people. It has been recommended by the hospital board to the authority having charge of a fund for Negro hospitalization.

From time to time this newspaper has set forth the grave danger hanging over every citizen in that our great city was alarmingly underhospitalized; that hospitalization as we have it is available in a great measure to the rich or well to do who had money to pay for decent hospitalization and the poor who had to accept charity. The other middle class of modest earners had to do the best they could, often sacrificing their health and menacing the lives and health of others.

Atlanta has forged ahead as a great college center for both races. It has been fittingly referred to as the Athens of the South because of the convergence of vast educational enterprise in the new university affiliations.

The establishment of the type of hospital advanced by the board would answer Atlanta's need. It will afford opportunities for colored internes in the medical profession as well as open the opportunities for those who desire nurse training.

It is hoped that our civic organizations, religious institutions and Chambers of Commerce will lose no time in memorializing the board for the realization of this long-felt need in this municipality.

# White and Negro Groups Aid Sumter Community Hospital

By M. L. ST. JOHN  
[Telegraph Correspondent]

SEP 17 1940

AMERICUS, Sept. 16—White and Negro people of Sumter county will join efforts today in a campaign to keep open a unique community project—a Negro hospital supported by public contributions. The hospital was begun two years ago when committees from white and Negro groups raised \$4,000 to purchase the brick building

and hospital property, and then dug up an additional \$1,000 to repair the property and get it ready for patients.

The hospital was first deeded to the city, and then turned over to the Americus and Sumter County Hospital Association to operate. Last year, however, it was turned over to the Junior Welfare league, young women's civic organization.

## WMS Groups Aid

The city and county governments' allocated a total of \$45 per month. Women's Missionary societies made monthly pledges, other groups contributed, and penny banks were placed in business houses.

Today as the annual campaign is held, the hospital has set a record. It boasts of a resident physician, three registered nurses, 12 other nurses, and two orderlies.

During the first six months of 1940 the hospital served 122 patients—more than twice as many as for the similar period last year. This 100 per cent increase in service was accomplished at a cost of less than 25 per cent increase in outlay.

From the beginning, the chief difficulty of the hospital has been to operate on its small income, as much of the services it rendered was for charity.

But it has come a long ways in two years, the Rev. Joseph Cook, pastor of the First Methodist church, who was general chairman of the citizens group that raised the money to purchase the building, declares:

"The Junior Welfare league is entitled not only to praise for its work with the Negro hospital, but is entitled to the wholehearted sympathy and support of the generous hearted citizenship of Americus and Sumter county."

Among the people who have played an important part in the development of this unique community Negro hospital are: Mrs. R. C. Pendergrass, Mrs. Ray Ansley, Mrs. James Collins, Mrs. Charles Crisp, Mrs. Charles Lannier, Miss Frances Shiver, Dr. W. S. Prather and Rev. Joseph Cook. The Negro committee is headed by Oscar Maxwell, and leading workers for the cause of the hospital include Mabel Barnum, Mary Lou Kennedy and Roy Dunham.

Americus, Ga., Recorder  
September 13, 1940

## Annual Appeal To Be Made Tuesday For Support Of Colored Hospital

Dalton Ga., N. Ga. Citizen  
December 19, 1940

Next Tuesday the Americus and Sumter County Hospital for Negroes will ask the city of Americus and Sumter county for voluntary contributions for support. The public generally is coming to appreciate the vital part that this institution plays in the total welfare program of the community.

For the past two years the hospital has been operated under the direction of the Junior Welfare League, and during this time has become more and more indispensable in the general health program of this city. The coming campaign for support is an annual affair, and it is understood that contributions made now will be annual contributions, and that no more calls will be made within the year.

The campaign will last just one day and it is urged that every citizen of Americus have a part in this worthwhile enterprise.

Augusta Ga. Chronicle  
December 13, 1940

## Hospital's Colored Pictures on Display at National Museum

The University Hospital's colored photographs on vitamin deficiencies is at the National Museum, Washington, for several months.

The exhibit won first prize in the Southern Medical Convention at Louisville, Ga.

The photographs, all in color, show the various types of skin lesions and other symptoms of the vitamin deficiency diseases, such as pellagra, and all of them were taken by staff physicians at the hospital.

After the exhibit is shown at the Washington museum, it will be sent to New Orleans where it will be displayed for some time at the New Orleans Graduate Medical assembly, and from there it will be returned to Augusta for display here.

Hospital authorities said yesterday they hope to add more pictures to the collection and set it up at the University Hospital as a permanent exhibit.

## COLORED CITIZENS ASK FOR HOSPITAL FACILITIES HERE

In an appeal addressed to the citizens of Dalton and to the civic clubs of the city, members of the Colored Civic Club this week asked support in getting hospital facilities here for colored citizens of Dalton. The appeal is as follows:

### GENTLEMEN:

We, the Colored Civic Club of Dalton, are addressing this appeal to you, with the request that you favorably consider the same and give it proper direction.

We have been accused of being imitative and perhaps that is true—at least, we have seen the wonderful comforts, benefits and conveniences of the Hamilton Memorial Hospital and we desire to imitate our white friends to the extent of having similar accommodations, which we cannot enjoy without your aid and assistance.

We compose only a small per cent of the wonderful population of Dalton, but what we lack in numbers we endeavor approximate in quality of law-abiding citizenship;

That we are industrious we submit for your decision. We endeavor to own, where possible our humble homes, but we have been unable, economical as we may be, to accumulate bank accounts, however, we join in a modest way to all appeals, as far as our limited means will permit. We have about the same ills, aches and pains as our good white friends, and are, perhaps, more subject to their contraction.

When our loved ones languish on a bed of pain and sickness, we petition you to provide a place of hospitalization. We will do what we can and we ask you to do something to provide this great blessing for our people when they are sick.

"Inasmuch as you have done it unto one of the least of these, you have done it unto me." You know you will do what you can for

us—please help us!

COLORED CIVIC CLUB OF DALTON BY

CLIFFORD MORRIS, Pres.

CHARLIE MAXWELL, Sec.

Directors HAROLD WALKER, Ch.

ARTHUR QUINN

WILLIE TREMMIER

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*Atlanta, Ga. Journal*  
June 25, 1940

### Negro Foundation Asks Hospital in Atlanta

WASHINGTON, June 25.—(AP). Trustess of the National Negro Hospital Foundation petitioned the Federal Government Monday to build six 100-bed hospitals for Negroes at a half dozen cities under the projected \$60,000,000 federal hospital aid program.

The trustees said the hospitals could be used for the training of Negro physicians and nurses. They recommended location at Louisville, Memphis, Atlanta, Birmingham, Charleston, S. C., and Dallas, Texas.

*Atlanta, Ga. Journal*  
July 3, 1940

### Newnan Selects Site For Negro Hospital

NEWNAN, Ga., July 3.—Allocation for the new Negro hospital which will be constructed here soon has been agreed upon.

The hospital will be built at the end of Spring Street, in the Rocky Hill section of Newnan, according to Hamilton C. Arnall, secretary and treasurer of the Newnan hospital board of directors.

*Atlanta, Ga. Constitution*  
July 12, 1940

## Negro Hospital Hangar Project For Georgia Up to Council Recommended Tomorrow

### Group Insurance Pro-\$50,000 Sought To Expand Delta Air Line Quarters.

A hospital capable of caring for 100 persons and a group insurance program which will reach far into the rural areas were recommended yesterday as local civic leaders met to discuss improved medical aid for Negroes.

A score of social-conscious persons—headed by the Rev. Nat Long, Robert F. Maddox, I. M. Sheffield and Kendall Weisiger—opened the movement Wednesday night and based their proposal upon the scarcity of hospital beds for Negroes in this state, a total of 611 beds for a 1,120,000 population.

A spokesman for the group explained, "This is one bed for 1,835 Negroes. Our plan calls for a 100-bed hospital composed of 40 private beds and 60 ward beds which can be built for \$250,000, thus relieving much of the seriousness of the scarcity."

*Atlanta, Ga. Constitution*  
November 3, 1940

City council tomorrow will consider a proposal to vote \$50,000 as the city's share of the cost of erecting a new \$100,000 hangar at the municipal airport for use of Delta Airlines Inc. While the location for the hangar will be the principal matter facing council according to forecast yesterday, several other important measures are slated for action.

One will provide a petty cash fund for the auditorium and will prescribe a new method of keeping books synchronized with the system now in vogue in the office of the city comptroller.

Major appropriations recommended by the finance committee are \$6,000 to supplement a \$35,000 fund already voted to the 179th field artillery for construction of an armory; \$10,000 for a \$100,000 WPA improvement for the Negro unit at Grady hospital; \$2,285 to extend stucco work on the auditorium.

Under the agreement between Delta Airlines and the city, the company will lease the hangar from the city for 20 years, paying \$2,500 a year rent. At the end of that time the hangar and other improvements will revert to the municipality.

# To Construct New \$30,000

## Negro Hospital In Newnan

8-1-40  
Contract To Be  
Let for Building

Saturday, Aug. 3

NEWNAN, Ga. —(SNS)— Plans for the construction of a new \$30,000 hospital for Negro citizens of this community were worked out last week by the board of Directors of the Newnan hospital, members of which disclosed that work would start at an early date.

Officials stated that plans are to be available this week and that a contract will be let Saturday August 3.

Appointed to the building committee were Hamilton C. Arnall, L. H. Hill, Guy Cole and Dan Manget. This committee was empowered to carry through to completion plans for construction of the new hospital.

To be completely modern, the new hospital, according to officials, will be located in the Rocky Hill section, at the end of Spring street.

A new road will be opened up leading to the hospital site, it was disclosed.

Management of the new institution will be the same as that used in the white Newnan Hospital, it said.

## Negro Hospital For Georgia Recommended

7-12-40  
Atlanta, Ga.  
Group Insurance Program for Rural Areas Also Urged.

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Columbus, Ga. ~~August 3~~  
November 24, 1940

## Negro Nurses Aid Hospital Project

The effort to raise funds, sponsored by the colored graduate nurses in co-operation with the City hospital, to improve the hospital facilities in the colored annex and to aid suffering humanity, is meeting with great success, and much interest is being manifested in the project, it was stated Saturday by Dr. William H. Spencer, Jr., who says:

"Ernest Green, the chairman of the committee to raise these funds, states that he feels that it is his duty to render the free service of haircuts and shaves to the male charity patients of the hospital each week, and that he is very glad to serve them in this capacity.

"We appreciate all co-operation coming from anyone in this movement and are especially asking all nurses to co-operate with us. A meeting of the committee in charge will be held at the City hospital Monday night, November 25, at 7:30 o'clock, and all nurses are urgently requested to attend. Please send all pledges to Miss McClellan at the City hospital. Clubs are asked to please make their contributions at the hospital."

## State 'Disgrace' At Milledgeville Hospital Ends

\$4,000,000 Buildings Called Equal to Any by

U. S. Aide.  
DEC 7 1940  
By WILLARD COPE.

Constitution Staff Writer.

MILLEDGEVILLE, Ga., Dec. 6.—More than \$4,000,000 of imposing structures, ending what officials freely termed a "disgrace to Georgia," were dedicated here today at the State Hospital for the Insane in ceremonies attended by at least 3,000 Georgians from every section.

The buildings, consisting of four large housing units and a tuberculosis hospital group, were praised by the federal government's chief representative, Colonel Morris Gilmore, assistant administrator of the Federal Works Agency, who declared he had seen "nothing which surpasses this hospital anywhere." Profound satisfaction was expressed by Dr. John W. Odum, superintendent, who said his 7,500 charges now were assured proper quarters.

### Tribute to Roosevelt.

The occasion brought from every speaker praise, Governor Rivers as having forced the project to completion in the face of numerous obstacles, and the Governor in his turn declared President Roosevelt personally responsible.

A pledge to co-operate with the incoming Talmadge administration was given by the Governor amid applause.

"Treatment as well as incarceration is necessary to the care of these unfortunate wards of the state," the executive pointed out. "We are meeting here a need which the people of Georgia have felt keenly for at least a quarter century. It is evidence of what can be done when the people and their public officials work together."

### RFC Funds Used.

Financed by the Reconstruction Finance Corporation through a state hospital authority, the structures were declared not to have added to the state's debt because of a self-liquidating plan. The entire institution is operated by the State Welfare Department.

In addition the male receiving building has been completely remodeled and restored to service and the capacity of the surgical hospital modernized and doubled in capacity.

L. W. Robert Jr. whose contracting firm was in general charge, served as master of ceremonies. Others taking part were:

Dr. Joseph Branch, director of public welfare; Congressman Carl Vinson; Francis Shurling of the office of government reports; Mayor George Carpenter, of Milledgeville; officials of the Masonic order and Woodmen of the World, members of the board of regents of the University System and the Welfare Board and numerous state dignitaries.

Praising alike the federal and state administrations under the New Deal, Congressman Vinson declared: "The weak and infirm, the blind and the lame, the aged and decrepit all have been given consideration and a place of protection and providence in the greatness of our government."

Colonel Gilmore struck an unusual note in pointing out that much praise was due to common workmen on the project, saying that but for the existence of these unemployed the government might not have participated.

Declaring that much remained to be done in Georgia in many fields, ranging from health and education to highways and safety, Governor Rivers described his administration as having pioneered and urged that the Talmadge and succeeding administrations should follow up wholeheartedly.

### Parker Attends.

Governor-elect Talmadge was not present but one of his closest aides, Homer Parker, was among the guests.

Milledgeville turned out in holiday array, and there was an elaborate luncheon earlier at the Georgia State College for Women at which President Guy H. Wells was host and Representative Marion Ennis, of Baldwin county, was toastmaster.

Music was provided by the Georgia Girls' Military Band both at the luncheon and dedication, while an A capello choir of the college gave several effective numbers and members of the student body presented square dances to lively tunes.

In what was regarded as a significant suggestion to his successor, Governor Rivers told the assemblage, "The next administration still has President Roosevelt to co-operate with for the next four years. For myself, I hope that the next administration will carry this work forward, and I for one, believe that it will."

# Race Angle Amended; U. S. Hospital Bill Adopted

WASHINGTON—(ANP) — which, though not as comprehensive as Barbour's amendment, partially covered the things asked for by the interests which had appeared before the committee at the hearings. After much delay in bringing it to the floor, the famous hospital bill, over which there was much wrangling and discussion, was finally adopted with its amendments concerning the treatment of Negroes and passed, bringing to districts where needed part of the federal program for the spending of some \$60,000,000 to care of the provisions of the health bill for sick and dying in these areas.

Originally written by Senators Wagner of New York and George of Georgia, the bill drew criticism because no provision was made for the care of Negroes in these southern areas, where most of the hospitals were to be built.

According to information, the Alpha Kappa Alpha Non-Partisan lobby took up the fight and notified the National Medical Association, the National Association for the Advancement of Colored People and other interested organizations.

Subsequently, representatives of these organizations appeared before the committee with pleas for the inclusion of recommendations which would safeguard Negroes.

When the bill was reported out of committee, this recommendation had been completely ignored. Then when attention was called to it, several of the original sponsors refused to consider another amendment until Mrs. Thomasina Walker Johnson of the AKA lobby went to Sen. Warren Barbour, who after hearing the story, promised to introduce his amendment when the bill was brought up.

The bill was brought up Memorial day and true to his promise, Senator Barbour arose and proposed his amendment. Senator Wagner, learning of the plan, with his colleagues had then formulated an amendment which they had discussed in private, and got Senator Barbour to agree with them.

Final adoption saw the inclusion of the Wagner-George amendment

NEGROES ASK BENEFITS IN HOSPITALIZA-  
TION BILL

*Christian Index*  
*3-28-40*  
*Jackson, Tenn.*  
D. R. CARL G. ROBERTS of the National Medical Association of Negro Physicians has sent an urgent petition to the Senate Education and Labor Sub-committee to assure that Negroes will be benefitted under the proposed Wagner Hospitalization Bill.

The problem of hospitalization is particularly acute for Negroes. There is reported to be only 7,000 hospital beds available for a Negro population of 12,000,000. The bill sponsored by Senator Wagner would appropriate \$10,000,000 for hospitals.

# OAK FOREST TUBERCULOSIS HOSPITAL DROPS COLOR BAR

Oak Forest, the county tuberculosis sanitarium, actually has no discriminatory policy and in the future will not raise the question of race in discussing a tentative admission. It was decided at a recent meeting of the Council of Social Agencies, presided over by Dr. James L. Hall, chairman of the committee on tuberculosis and clinic supervisor of Provident hospital.

At this meeting it was also decided that in order to obtain a closer relationship between agencies responsible for the care of tuberculosis cases, representatives from Oak Forest, the Municipal Tuberculosis sanitarium and the board of health should be included in the tuberculosis committee of the health division, Council of Social Agencies, and there should be some clarification of the present plan of notification on discharging patients and follow-up so that some one of the 14 agencies now receiving notifications would be held definitely responsible.

Present at the meeting, in addition to Dr. Hall, were Supt. Frank Venecek of Oak Forest; Dr. Otto Charles Slack, medical director; Miss Edna Nicholson, director of the CRA medical relief service; Miss Elizabeth McConnell, chairman of the council's health division; County Commissioner Edward Sneed; Miss Lillian Proctor, CRA district supervisor; Mrs. Marie Novak, director Jewish Tuberculosis service; Mrs. Gladys Christianson, University of Chicago school of social service administration; Dr. Arthur Falls, president of the Cook County Physicians' association, and Mrs. Ruth Taylor of Provident.

This meeting was the outgrowth of activities by a special committee formed to obtain adequate care for tuberculosis and other chronically ill patients on the south side. Since formation of this

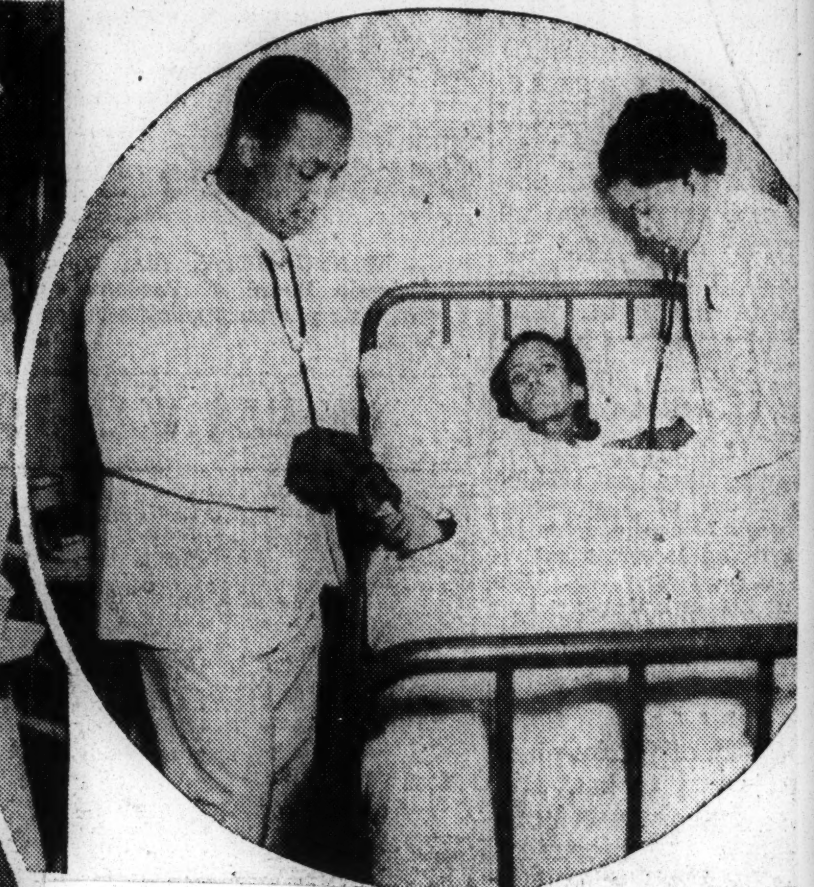
committee, many conditions have been remedied.

Superintendent Venecek said that since the Municipal Tuberculosis sanitarium interests itself only in Chicago residents, Oak Forest concerned itself first with the rest of the county which included 19,000 Negroes. Limitations on intake are due to lack of bed space, and not to discrimination, he said, pointing out that failure of the recent bond issue prevented

increase of their bed capacity by 1,500 beds. Both Mr. Venecek and Dr. Slack admitted that the question of race was unnecessary when asked of an applicant and will not be raised again with admission. It will be based solely on stages of the disease, locality from which the patient comes and seniority on the waiting list.

Membership of Oak Forest M. T. S. and board of health officials on the council's tuberculosis committee is expected to make for greater coordination between these groups and may lead to responsibility of the interested agency for the patient following his discharge from the sanitarium.

# MEN AND WOMEN "IN WHITE" SERVE THE SICK AT CHICAGO'S NOTED PROVIDENT HOSPITAL



One of the finest institutions of its kind in the middlewest, Provident hospital in Chicago, stands as a brilliant monument proclaiming to the doubtful world the achievements of the nation's dark-skinned "men in white." Overlooking Chicago's fashionable Washington park, the hospital moved to its present site, 51st and Vincennes, in 1933. To learn more about the inner workings of this great institution, The Courier representative donned a white coat and disguised as an interne, toured the spacious Children's Ward on the fourth floor. Top left, we found young interne Dr. Edward Gray and Nurse Betty Reed of New Bedford, Mass., examining little Albert Balentine, who seems to be none too happy about the whole thing. Center is six-year-old June Gushiniere, one of the first colored children born in the hospital. This is her first trip back and she is being examined by Nurse Reed and Dr. Hilda Bolden of Philadelphia, one of the country's outstanding women physicians. Left, Dr. Bolden, resident physician in pediatrics, administers a bit of cheer to patient Norma Harrod while Dr. Roger Thurston of Washington, D.C., checks her condition. Our tour completed, we started out, but found at least two people who had seen through our disguise. They were two whose business it is to know what's going on in the hospital, for Switchboard Operator Marian Rhinehart, left, and Receptionist Aletha Carter keep fingers constantly on the pulse of the immaculate edifice directed by Dr. John W. Lawlah.—Atlas News Service Photos.

## New Hospital Sought For South Side

Civic leaders have mobilized under Alderman Earl B. Dickerson of the Second ward, this week, to obtain a new hospital for the South side in the event Congress passes President Roosevelt's bill to establish fifty new hospitals throughout the country.

*Depender*  
"There is only one first-class hospital for Negroes in this community of 300,000 people," Dickerson said in a statement to the press. "That institution—Provident hospital—is doing a noble work but it is unfair to expect it to carry the entire burden of fighting the diseases so rampant on the South side."

*1-6-40*  
"Thousands of the South side citizens are forced each year to take refuge in the Cook County hospital, yet no serious effort has been made toward establishing a branch of the County hospital in an area where contagious disease has its highest rate of concentration," Dickerson stated.

Facilities would be provided under the President's plan for a substantial number of patients. Average cost of the hospitals would be \$150,000 each.

# Appointed to Hammond, Ind., Hospital Staff

*Courier*  
HAMMOND, Ind., June 13.—Dr. Dennis A. Betha has been elected to a staff membership at St. Margaret hospital here, the largest in this state excepting the City hospital in Indianapolis.

## HOSPITAL- 1940

## KENTUCKY

## Mayer Favors Establishment Of Negro Hospital

*Daily World*  
LOUISVILLE, Ky. (SNS)—

At long last it seems that the agitation that has been waged for the establishment of a Negro Hospital is going to bear fruit.

For years it has been argued that if Colored doctors, nurses and internes could not be admitted to the City hospital that the City should provide a hospital to be manned and supervised by Colored medical people.

It has been claimed that the City Hospital is under the supervision of the University of Louisville and that many white physicians cannot enter and practice there. That was the reason given for refusing to allow Colored physicians, nurses and internes from serving in the Negro wards of the city Hospital. The Federal Government is appropriating \$60,000,000 to establish hospitals over the country. Rev. Amos H. Carnegie of New York and Washington, representing an organization trying to get more Negro hospitals, is in the city. He

has succeeded in interesting Mayor J. D. Scholtz and Dr. Hugh R. Leavell, Director of Health and the Board of Alderman in the idea of a Negro Hospital to be conducted by Negro doctors and nurses and into which Negro internes can go. Mayor Scholtz, it is said, is heartily in favor of the proposition for that purpose. Mr. Scholtz seems to stand high in official Washington and it is thought if he goes after money for a Negro Hospital he can get it. The City of Louisville would have to maintain it after it was established. This kind of service is what has made Mayor Scholtz popular with Colored Louisville. Another movement that has put a feather in the Mayor's cap is his efforts to get a five cent car fare for Louisville. This appeals to Colored people and to white people of moderate or less means. The Mayor is making a real fight for that and is sure to get a better rate than ten cents a ride or three tokens for a quarter.

# These 5 Doctors Named To Interracial Faculty At Flint-Goodridge Hospital



NEW ORLEANS, La. A Five Negro doctor are on the interracial faculty for the Fifth Annual Postgraduate Course for Physicians at Flint-Goodridge Hospital of Dillard University at New Or-

leans. They are (left to right) Dr. Julian H. Lewis, Associate Professor of Pathology, University of Chicago; Dr. Peter M. Murray, Attending Gynecologist, Harlem Hospital, New York City;

Dr. William A. Beck, Professor of Clinical Medicine, Meharry College; Dr. Logan W. Horton, Chief, Department of Surgery;

Dr. Frederick A. Rivers, Chief, Department of Eye, Ear, Nose and Throat, both of Flint-Goodridge Hospital.

The total faculty for the course is composed of thirty-eight phy-

sicians, most of whom are members of the medical school faculty at Tulane University or Louisiana State University. The course runs for two weeks beginning June 17th and is open to all physicians.

# FLINT-GOODRIDGE HOSPITAL SERVING YOUNG PHYSICIANS

## FLINT-GOODRIDGE PROMOTIONS FOR '41 MADE PUBLIC

### Review of Rosenwald Fund Advancement of Two Doctors as Department Heads

Activities Indicates Its Rising Importance  
DEC 17 1940

Announced by Kearny  
DEC 18 1940

Growing importance of the Flint-Goodridge hospital as a center for the professional development of Negro doctors was indicated in a review of the activities of the Julius Rosenwald Fund hospital committee of the university's board of trustees. The promotion of two Negro doctors as department heads was announced by Mr. Kearny. Dr. N. R. Davidson was made chief of the department of gynecology and obstetrics, and Dr. C. H. D. Bowers was appointed senior associate in charge of the division of syphilis in the department of medicine.

"Flint-Goodridge hospital in New Orleans," the review stated, "is a demonstration of hospital service in a Southern city with an experimental program or extension work for community health. It has made headway in meeting the major health programs of New Orleans' Negroes, has developed a penny-a-day hospital insurance plan which is serving an increasing number of patients, and is becoming an important center for the professional development of Negro doctors."

Chief efforts of the Julius Rosenwald Fund, Edwin R. Embree, president, stated in the review, are to enlarge opportunities for Negroes and to extend education, especially in the South.

During the two-year period, Mr. Embree stated, the fund expended \$1,057,201 on "efforts to make rural schools a more vital force in the Southern states; fellowships for white and Negro South-erners; aid in building up a few university centers for Negroes; and improvement in Negro health."

"The fund for a number of years," he continued, "has been concentrating on the four major university centers: Howard university in Washington, D. C.; the group of colleges in Atlanta, Ga., under the aegis of Atlanta university; Fisk university in Nashville, Tenn., and Dillard university in New Orleans."

"The first three centers have at least the beginnings of university development, with modest graduate work and important professional schools as well as strong undergraduate colleges. Dillard university is still in a more elementary stage. It emphasizes a present sound learning on the college level and an unusually fine health program at the Flint-Goodridge hospital."

Fifty fellowships were awarded to Negroes during the two-year period, the review stated, "in order to create leadership in the

Dr. T. H. Mims, senior associate. Department of Urology—Dr. E. B. Vickery, consultant; Drs. J. J. Donasier and W. E. Weeks, senior associates; Drs. H. P. Wheeler and R. E. Fullilove, junior associates. DEC 18 1940

Department of Otolaryngology—Dr. A. J. McComiskey, consultant; Dr. L. W. Horton, chief.

Department of Ophthalmology—Drs. H. N. Blum and E. E. All-

geyer, consultants; Dr. L. W. Horton, chief.

Department of X-ray—Dr. L. J. Menville, consultant; Dr. J. N. Ane, junior consultant.

Department of Pathology—Dr. A. V. Friedrichs, consultant.

Department of Psychiatry—Dr. C. S. Holbrook, consultant.

Department of Dermatology—Dr. M. D. Lang, junior consultant.

Department of Dentistry—Dr.

J. P. Wahl, consultant; Drs. W. C. Booker, E. T. M. Devore, K. L. Douglas, W. C. Easton, B. J. Mar-

tin, Taylor, Segue and George B. Taylor, consultants.

In addition to Mr. Kearny members of the hospital committee are E. J. LaBranche, Bishop A. P. Shaw, Edgar B. Stern, Miss Fannie C. Williams and William B. Wisdom.

Department of Surgery—Drs. Isidore Cohn, Urban Maes and G. C. Anderson, consultants; Dr. Rivers Frederick, chief; Drs. W. R. Adams, C. C. Haydel and P. T. Robinson, senior associates; Drs. O. W. Duncan, J. M. Epps and H. E. Robinson, junior associates.

Department of Gynecology and Obstetrics—Drs. Hillard E. Miller and Conrad G. Collins, consultants; Dr. N. R. Davidson, chief; Drs. J. O. Sheffield, Thelma Y. Coffey, R. J. Coker, R. L. Figgins, T. D. Hayes, E. P. Jimson and J. W. Thomas, junior associates; Drs. H. Horne Huggins and Henry Jenkins, clinical assistants.

Department of Pediatrics—Drs. C. J. Bloom, consultant; Dr. J. E. Strange, junior consultant; Dr. Ernest Cherrie, senior associate;

# Cornerstone To Be Laid On New \$50,000 Hospital

Mound Bayou To  
Witness Rites

On August 2  
*Early word*

MOUND BAYOU, Miss.—(ANP)—The Knights and Daughters of Tabor, of Mississippi, will lay the cornerstone to their \$50,000 hospital on Friday, August 2.

Construction of the hospital is now underway under the supervision of McKissack and McKissack, building contractors of Nashville.

The organization has a membership in Mississippi of more than 25,000 and has cash assets of nearly \$200,000. The organization has existed in Mississippi for more than fifty years. The executive officers are: P. M. Smith, chief grand mentor, Mound Bayou; W. M. Lee, chief grand scribe, Shelby; Katie Aills, grand high priestess, Mound Bayou; Joseph Betts, chief grand treasurer, Clarksdale; E. B. Robinson, chief grand recorder, Greenville; E. G. Mason, chief grand orator, Clarksdale; and B. A. Green, attorney, Mound Bayou.

The principal speaker at the ceremonies will be Dr. A. W. Dumas, president of the National Medical Association of Natchez. Other speakers will include T. J. Huddleston and Dr. L. T. Miller, Yazoo City, sponsors and promoters of the Afro-American hospital, the only Negro owned and operated hospital in Mississippi. Mr Huddleston is custodian for the organization and Dr. Miller is supreme president and medical director.

The hospital project of the Knights and Daughters of Tabor is the largest ever undertaken by the organization in its history and promises to be a definite asset to the order and the Negro race throughout the South.

Representatives of other Fraternal and Medical organizations will also be present and appear on the program.

MOUND BAYOU

SOON TO HAVE

NEW HOSPITAL

*Call 7-26-40*  
*Kansas City, Mo.*  
Laborians to Lay Cornerstone on \$50,000 Building on August 2

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Clarksdale Miss Register  
December 14, 1940

## Negro Hospital Near Completion

(By P. A. Smith)

The Taborian Hospital project, launched by the Knights and Daughters of Tabor, negro fraternal organization of Mississippi is nearing completion and should be ready for dedication during the early part of 1941.

The organization is composed of more than 25,000 members in Mississippi and is recognized as the most powerful negro fraternal order in the state.

The hospital building will cost more than \$50,000 and is being erected under the supervision of Moses McKissack, negro contractor of Nashville, Tenn. The building is acclaimed by building experts throughout the country as a masterpiece of workmanship and will prove to be a definite asset to the negro race and the state.

West Point, Miss. Leader  
December 7, 1940

A new and modern hospital is soon to be opened at Mound Bayou, the only exclusively Negro town in Mississippi. The building was designed by a Negro architect, the work was done, by Negro carpenters and brickmasons, and the money was raised by Negro citizens.

Clarksdale, Miss. Register  
July 8, 1940

## DR. UNDERWOOD IN ADDRESS ON HOSPITAL PLAN

Mrs. Gerald FitzGerald  
Donates Ground for  
Negro Hospital Here.

LOCATION IS NEAR  
LIMITS OF CITY

Land Valued at \$6,000  
Given Chamber of Com-  
merce Committee.

Mrs. Gerald FitzGerald, widow of the late Gerald FitzGerald, one of Mississippi's outstanding attorneys, today gave six acres of land on the Friars Point Road, near the foot of Cutrer Hill to the Coahoma County Chamber of Commerce Negro Hospital Committee for the purpose of erecting a fine colored hospital which is to serve the negro populace of this area. The land is valued at some \$6,000 or more.

The announcement of the gift of this space was made at a meeting of the chamber of commerce committee and prominent local businessmen, attended by Dr. Felix J. Underwood, director of the State Health Department, held at the Alcazar today at noon.

Dr. Underwood, speaking before the group announced that he is gratified to note the interest of delta business leaders in the plan for better health standards among negroes of this delta section.

He stated that he will offer co-operation of the state health department commensurate with the interest and support given the negro hospital movement here, and added that he believes this city will be able to secure full support of the government in the plan to erect an adequate negro hospital for the overwhelming colored pop-

ulation of this section.

Dr. Underwood was expressly appreciative of the efforts of Dr. T. M. Dye, mayor of the city of Clarksdale, Dr. Guy R. Post, director of the local health department and E. L. Anderson, chairman of the chamber of commerce negro hospital committee, who are taking the lead in planning the erection of the hospitalization unit.

It was consensus of those present at today's meeting that the hospital will be erected in the near future, through government aid, plans will commence immediately to get the support of federal funds necessary.

The lot given by Mrs. FitzGerald in memory of her distinguished husband, is located on the west side of the Friars Point road, directly across the county barn road-way from the Bornman Lumber Co.

It is estimated that an adequate negro hospital would cost something near \$100,000.

The structure would be modern in every respect, with the very best equipment and would have a splendid hospital staff capable of caring for the needs of the colored population of this delta section.

# DUNN COMPANY TO CONSTRUCT NURSES HOME

*Call*  
Total Cost of New Building  
Including Isolation Ward  
Will Be \$198,498  
*Call 2-23-40*

KANSAS CITY, Mo. —

The general contract for construction of the General hospital No. 2 Nurses home was awarded by the city Tuesday, January 2, to the J. E. Dunn Construction company, lowest of the 11 bidders on the job. The Dunn company bid, as accepted by the city, was \$158,642.

Separate contracts were awarded on heating, plumbing and electricity, making the total construction cost of the Nurses home, the isolation ward and the kitchen, \$198,498.

The plumbing contract was let to the Kansas City Plumbing and Heating company for \$14,381. The electrical work will be done by the Crescent Electric company which bid \$10,000. The heating contract was awarded to the Interstate Heating and Plumbing company for \$15,475.

The contracts will not be formally awarded and signed until they have been approved by the city council which is scheduled to take them up at its meeting Monday night, January 8.

The original bid of the J. E. Dunn company was \$161,242. One alternate, having to do with the concrete footings, was accepted, bringing the bid down to the \$158,642 figure.

Plans for ground breaking will not be made until after the council has approved the bids, the Dunn company said yesterday.

## Presenting Incubator to Wheatley Hospital *Call 2-23-40 Kansas City Mo*



Members of Salon No. 94 of the Eight Et Forty society, honor organization of the American Legion auxiliary, presented a \$225 incubator to the Wheatley-Provident hospital, Tuesday, February 13, at a program in the hospital clinic. Shown here are, left to right: Mrs. Harry White, member of Salon No. 94; Mrs. D. M. Farnsworth, state secretary-treasurer and first vice-president of Salon 94; Mrs. Frank Hunter, past state president; Mrs. Ellen Louise Warren of Washington, D. C., national president; Mrs. Charles Heer, state president; Mrs. H. P. Lowenstein Jr., president of Salon 94; and Mrs. M. Portman, state membership chairman, and chairman of child welfare work in Salon 94.

## Laud Largest Negro Hospital On Airwaves

*Call 4-2-40*  
ST. LOUIS, Mo., April 4 (AP)—Homer G. Phillips' hospital, largest colored hospital in the world, was lauded as an outstanding milestone in the progress of the Negro race in a radio address last week by John T. Clark, executive secretary of the Urban League, in connection with Negro Health Week which began Sunday.

Accommodating 720 patients with a staff of 500, the hospital provides 45 of the 55 Negro internes graduated each year in the United States, according to the speaker. He further stated: "These institutions, with their all-Negro staffs, mean segrega-

tion, and while segregation is a doubtful expedient, it does bring results. It gives the minority, in this instance the Negro, an opportunity to show its stuff, to win vital experience and demonstrate that it has something valuable to contribute to the cause of community welfare and progress."

Negro Health Week, and annual observance, will depict the progress of the Negro in health methods, and health classes will be held for the general public.

## New Internes At Phillips

*Argus 6/18/40*  
Twenty-seven internes have been received into the Homer Phillips Hospital department of internes. *Coming from HARRY MEDICAL COLLEGE* were William J. Arnold, Jr.; Orion T. Ayer,

Claude T. Carline, John B. Clayton, Jr., Audrey K. Fleet, Arthur M. Jackson, Jr., Isaiah A. Jackson, Jr., John W. Lewis, Luther J. Lemon, Wilbur C. Markin, Oswald G. Smith, Sidney E. Smith, Spurgeon Sparks, Jr., James M. Walden, James M. Wittico, Jr., Joseph G. Wiggins, Clay M. Wilson, Wm. H. Wilson.

From HOWARD UNIVERSITY came Dunbar P. Gibson, Joel Edward Lewis, Romeo H. Lewis, Harry Lee Riggs and Jerry Allen.

John W. Carney and Wm. F. Goins are internes from WAYNE UNIVERSITY while Neville A. Griffith is from MCGILL UNIVERSITY and Benjamin Kagwa from NEW YORK UNIVERSITY.

# First Nurse at K. U. Hospital's Eaton Ward

*Call - 5/17/40 Kansas City Mo.*



MRS. ROBERTA W. CONRAD, night nurse, at her desk in the Eaton ward for Negro patients at the University of Kansas hospital in Rosedale. Mrs. Conrad is the first Negro nurse to be employed at the hospital, her appointment com-

ing as the result of conferences between the dean of the K. U. medical school and representatives of the National Medical association. Mrs. Conrad, a native of Wichita, Kas., is a graduate of Freedmen's hospital nursing school in Washington.

D. C. She worked at Freedmen's following her graduation and for eight years before coming here was head nurse at the Carson hospital in Washington. Mrs. Conrad is the daughter of Frank Walton and Mrs. Josephine Walton of Wichita.

## Hospital Group Will Convene In 'Orleans In '41

NASHVILLE—(A. N. P.)—With approximately 30 hospital superintendents and medical directors representing the majority of the larger Negro hospitals in the nation in attendance, the fifth annual meeting of the National Conference of Hospital Administrators was held Thursday and Friday at Meharry Medical College.

The meeting, which saw the entire slate of officers re-elected, assembled to discuss hospital problems with the idea of increasing efficiency in their own institutions as well as effecting cooperative agreements that would be mutually beneficial.

Dr. Robin C. Buerki, an outstanding hospital administrator and at present, director of study, commission of graduate medical education of the American Hospital Association, was the guest hospital consultant. He gave lectures on both days and conducted group conferences. Many other persons, prominent in hospital administration, appeared on the program, among whom were Dr. Edward L. Turner, president of Meharry, and Dr. M. O. Bousfield, director of Negro health of the Julius Rosenwald fund. Mrs. Estelle Massey Riddle and Mrs. Mabel K. Staupers representing the National Association for Colored Graduate Nurses, gave a panel discussion of nursing service and nursing education. The conference went on record as approving the existing agreement with respect to the appointment of internes but set the date of notification of appointment to November 15 of each year in conformity with the recommendations of the Association of American Medical colleges.

Members present were A. W. Dent, Flint-Goodridge hospital, New Orleans; Dr. Henry M. Min-

ton and John L. Procope, Mercy hospital, Philadelphia; E. R. Carney, Parkside hospital, Detroit; Dr. John W. Lawlah, Provident hospital, Chicago; Dr. Frank P. Raiford, Trinity hospital, Detroit; Mrs. Bettye Jenkins Phillips, Provident hospital, Baltimore; Dr. Oral S. McClellan, Homer G. Phillips hospital, St. Louis; Dr. J. M. Franklin, Prairie View hospital, Texas; Dr. G. W. Johnson, Tampa Municipal hospital, Florida; Dr. Edward L. Turner, president, Meharry; W. T. Mason, Norfolk Community hospital, Virginia; Wm. M. Rich, Lincoln hospital, Durham, N. C.; Dr. T. Edward Jones, Freedman's hospital, Washington; Dr. L. C. Downing, Burrell Memorial hospital, Roanoke, Va.; Dr. L. E. Foote and Miss D. R. Penn, Florida A and M hospital, Tallahassee; Miss Geneva S. Collins, L. Richardson Memorial hospital, Greensboro, N. C. Local personages present included Miss Louise Halford, Henry H. Miller, L. E. Ford and Dr. John H. Hale and many others of the Meharry faculty.

The present incumbent officers were re-elected for the next year as follows: Albert W. Dent, chairman; Dr. Henry M. Minton, vice chairman; Dr. John W. Lawlah, secretary-treasurer.

Flint-Goodridge hospital, New Orleans, was selected as the place for the 1941 meeting.

## Reelect Officers For 1941

### Thirty Colleges Represented at Health Conference

NASHVILLE, Tenn.—Albert W. Dent was re-elected chairman of the National Conference of Hospi-

tal Administrators at its recent fifth annual meeting at Meharry Medical College.

Approximately 30 hospital superintendents and medical directors representing the larger colored hospitals in various sections discussed hospital problems and discussed methods of improving the efficiency in their own institutions.

### OTHERS RE-ELECTED

Dr. Henry M. Minton, of Mercy Hospital, Philadelphia, was re-elected vice chairman and Dr. John W. Lawlah, Provident Hospital, Chicago, secretary-treasurer.

Flint-Goodridge Hospital, New Orleans, was selected for the site of the 1941 meeting.

Dr. Robin C. Buerki, director of study, Commission on Graduate Medical Education of the American Hospital Association, was the guest hospital consultant.

Among others attending the conference were: W. T. Mason, business manager, Norfolk (Va.) Community Hospital; Mrs. Betty J. Phillips, Provident, Baltimore; Dr. E. L. Turner, president of Meharry; W. M. Rich, Lincoln, Durham; Dr. T. E. Jones, Freedmen's Washington, D. C.; Dr. L. C. Downing, Burrell Memorial, Roanoke, Va., and Miss Geneva S. Collins, Richardson Memorial, Greensboro, N.C.

### HEALTH CONFERENCE

Approximately 60 delegates from 30 colleges were present at the second regional conference of College Health Workers in Colored Institutions at Meharry Medical College recently.

Next year, the conference will meet either in Richmond, Va., or New Orleans.

Among those participating were E. L. Jamison, West Virginia State; Dr. Paul B. Cornely, Howard University; Dr. Maurice Bigelow, Columbia, and Dr. L. G. Richardson, Lincoln of Missouri.

## HOSPITALS-1940

## NATIONAL CONFERENCE OF HOSPITAL ADMINISTRATORS

Nashville, Tenn. Wednes

April 2, 1940

### Negro Hospital Group To Hold Meeting Here

Twenty-five members of the National Conference of Hospital Administrators, a Negro organization, representing hospitals throughout the country, will convene in Nashville at Meharry Medical College Thursday and Friday for the annual convention of the body.

There are 110 Negro hospitals in the United States, it was stated, twenty-five of which have been approved by the American College of Surgeons.

The meetings will open Thursday at 9:30 a. m. and will close Friday afternoon at 5 o'clock.

## HOSPITALS- 1940

## NATIONAL HOSPITAL ASSOCIATION

### Hospital Heads To

### Consider Needs of

### Colored America

*Norfolk, Va.*

HOUSTON, Texas—Meeting in Houston, in conjunction with the National Medical Association Convention, August 11 to 13, is an affiliated organization, the National Hospital Association.

In a special symposium discussion, the nation's hospital executives will consider the vital question: "How can the National Hospital Program best serve the needs of America."

Dr. Carl G. Roberts, of Chicago, will preside and speakers will seek to bring out how the best interests of the colored population will be preserved in an program for nationwide hospitalization.

Those who have been assigned to develop this theme include: Dr. W. M. Thomas, Leavenworth, Kans.; E. R. Carney, Detroit, president of the National Hospital Association; Dr. John A. Kinney, director of the John A. Andrew Hospital at Tuskegee Institute; A. W. Dent, superintendent of Flint-Goodrich Hospital, New Orleans, and Dr. S. H. Freeman, orthopedic surgeon, Meharry Medical College, Nashville, Tenn.

Washington D. C. Post  
March 19, 1940

## McNutt Favors Negro National Hospital Fund

**FSA Administrator  
Commends Preacher  
Who Originated Plan**

Federal Security Administrator McNutt, in a radio interview last night, approved plans for a Negro National Hospital Fund. He interviewed Amos H. Carnegie, a colored preacher, who conceived the hospitalization plan.

Carnegie told McNutt only three public hospitals exist in the country for its 13,000,000 colored people. In every city, especially in the South, where three-fourths of the Nation's colored people live, there is need for better hospitalization, he said.

The foundation, Carnegie said, aims to assist in providing adequate hospitalization of the Negro sick and to provide facilities for the proper training and practice of Negro doctors and nurses. It hopes to assist in placing at the command of Negro doctors and nurses the means by which they may have a chance to grapple with the health problems of their own race, thereby to assist in reducing our very high death rate, which is shamefully lowering our country's public health standards as compared with other nations."

The movement would be financed by voluntary contributions of \$10 each from white and colored citizens. Carnegie said the first development would be construction of a hospital at Lynchburg, Va.

McNutt replied that for colored people to take the initiative in bettering their condition "is the only way you are going to improve your condition. Nobody can improve it for you. . . . A race, like an individual, must advance by its own efforts."

"I hope you will live long enough to see your dream come true and that your labors so generously given for the welfare of your race will be amply rewarded."

## "Negro Hospitalization" Radio Broadcast Topic

On Monday, February 26, at 3.35 P. M. United States Senator Styles Bridges, former Governor of New Hampshire, and the Rev. Amos H. Carnegie, founder and executive secretary of the National Negro Hospital Foundation, Inc., will broadcast over the National network of the Columbia Broadcasting System, on the subject: "Negro Hospitalization." The broadcast will be from the studios of WJSV in Washington, D. C.

The aims of the broadcast will be to bring to the attention of the American people the woeful need for adequate hospitalization of the Negro sick and opportunities for the proper training and practice of Negro physicians and nurses in up-to-date hospitals.

about 1,500 Negro graduate nurses foundation was organized in April, in the country's public hospitals, 1937. and all but 200 were employed in New York City alone.

The foundation, the Rev. Mr. Carnegie said, seeks a penny a week, for twenty years, paid in advance, which amounts to \$10.

Those who pay one dollar become a member of the movement for one year; five dollars, for five years, and ten dollars, for life.

Senator Bridges said that the movement was a step in the right direction because he felt that any constructive program for this nature for the race's advancement "must originate with Negroes themselves." Later he paid for a ten-dollar life membership.

The first hospital and nurses' home under the foundation's plan will be built in Lynchburg, according to the Rev. Mr. Carnegie. It

Dr. Christian is a member of the National Board of Trustees and of the Executive Committee of the Foundation.

The treasurer of the national campaign for funds for the Lynchburg Hospital is another Lynchburger — J. W. Bibee — a prominent white business man — a wholesale grocer and chain store magnate.

# Opens Nation-Wide Drive For Funds to Build Chain Of Hospitals for Negroes

**Rev. Amos Carnegie Says \$16,000 Has Been  
Raised for First \$150,000 Unit to Be Built  
In Lynchburg; Ground-breaking Will be May 1**

Conducting virtually a one-man crusade for a chain of hospitals to be located throughout the United States, the Rev. Amos H. Carnegie of Lynchburg, Va., and New York, founder and executive secretary of the National Negro Hospital Foundation, Inc., and chairman of the Henry A. Christian Hospital movement in Lynchburg, made an appeal for funds, over the CBS network, Monday night from Station WJSV.

Speaking on the same program was U. S. Senator Styles Bridges of New Hampshire.

The broadcast was designed to acquaint the general public of the urgent need for adequate hospitalization of the Negro sick in the United States and opportunities for the proper training and hospital practice for Negro doctors and nurses.

### Made U. S. Study

The Rev. Mr. Carnegie who says he has made a nation-wide study of the hospital needs of the Negro in the United States, having traveled more than 45,000 miles, stated that apart from three exclusively Negro public hospitals in the United States there were only

will contain 50 beds and will cost approximately \$150,000 to build and equip. Towards this amount only \$16,000 has been raised, he said. Every effort to have the entire amount — a balance of \$134,000 — by the beginning of spring will be made, he stated, so that ground may be broken for the laying of the foundation not later than May 1.

The first hospital under the foundation's plan will be built in Lynchburg. This hospital will be named for a distinguished Lynchburger — Dr. Henry A. Christian, a former dean and now Hersey professor of theory and practice of physics in the medical school of Harvard University, and physician-in-chief of the Peter Bent Hospital in Boston, in whose office the

# Dr. John B. West, at 35, Directs 150,000-Patient Harlem Clinic

## 6 Divisions Keep Staff of 240 Busy; T.B. Theory Blasted

By HARRY B. WEBBER

NEW YORK—The great block bounded by Lenox Avenue, Fifth Avenue, West 136th and West 137th Streets in Harlem is dedicated to medicine in its various phases.

The bulk of the block is the site of Harlem Hospital, but this story is devoted to the Fifth Avenue side of the "Medical Block." It concerns the three-story light brick edifice at 2238, which is the Central Harlem Health Center presided over by youthful Dr. John Baldwin West, descendant of one of Washington's first families, world traveler and graduate of the Harvard Medical School.

### 150,000 Treated Annually

Each year, 150,000 patients enter and distribute themselves into seven clinics under general direction of Dr. West. This building is only one of five in Harlem devoted in whole or in part to health work and valued totally at over a half million dollars.

The center is a model of modernity and efficiency, from the tiled lobby from whose walls mosaics of Hippocrates gaze down at visitors, to the most distant room in the building.

The institution works with the cool efficiency possible only under expert executive direction. The building was opened October 4, 1937.

### "Workshop" His Hobby

Dr. West battles for a healthier Harlem, invades countless meetings per year and urges the people to visit the center. He left his interesting "workshop," where he was erecting a model health exhibit for the Harlem YMCA, to talk to the interviewer.

He mentioned this shop when asked what his hobbies were. He seems to have little leisure time,

because he is either attending meetings after work hours or trying out a new idea to catch public attention with an exhibit which graphically illustrates the health issue and which is constructed by his own hands.

### Energy Seems Boundless

His sanitary metal desk in room 307 sits at the end of a spacious room, flooded by daylight and spotless. You can see he is not what is known as a "desk man." His restless energy carries him constantly into action.

In speech he wastes no words, answers queries with the economy of the true scientist. He seldom smiles, yet possesses a very agreeable personality and a penetrating glance that seems to immediately pierce to the core of people and problems.

### Spikes T. B. Theory

His brief but all inclusive answer to the question of Tuberculosis prevalence proves this. Dr. West answered:

"Tuberculosis is no more prevalent among colored persons than whites, but the death rate is much higher and this makes the former's figures appear much higher. The reasons for this death rate are mainly economic.

"In colored families, usually only one person is working. He does not stop working when he finds he has the disease, knowing if he stops his family may starve. So he works until he must go to the hospital—usually to die.

### Resistance Not Developed

"Further the colored race has been exposed to tuberculosis only 300 years and this is not enough time in which to build up a racial resistance to it. Jews still have a high incidence after being exposed to it for 3,000 years, but they have built up enough resistance so that few die from it."

Discussing syphilis, Dr. West said it also seems more prevalent among our race because they respond more readily to calls for diagnosis. Lack of funds makes them go to public clinics where records are kept. Whites may be equally affected, but the figures are not as available.

### Has 6 Divisions

The pre-natal clinic at the center has been discontinued since last year, but other clinics and the doctors who are in charge follow:

**SOCIAL HYGIENE**, Dr. Daniel S. Paley;

**TUBERCULOSIS**, Dr. Vernon Ayer, Dr. Louis Rosenbaum, Dr. Neville C. Whiteman (Harlem River Houses Clinic);

**CHEST**, Dr. S. Aubrey Gittens (Lower Harlem Health Center);

**DENTAL**, Dr. Louis R. Middleton;

**EYE**, Dr. Cyril Olivere;

**CHILD HEALTH**, under a group of physicians in seven health stations in Harlem.

The general chief of the New York Department of Health, Dr. John L. Rice, is Dr. West's chief.

### 240 Employed

A total of 240 employees work in the Harlem Health set-up, all

of them under Dr. West. He begins work before 9 and finishes many hours after his technical 5 o'clock finishing time.

He reserves the hours from 9 to 10 for answering mail; 10 to 12 for conferences with his staff; 12 to 2 for mapping out health education programs; 2 to 4 for appointments, and from then on he goes out to various meetings, where he preaches the gospel of health to great numbers of people in all walks of life.

Last Tuesday he was leaving for a 6 p.m., appearance at the New York State Counsel of Negro Welfare at the Harlem YMCA.

### Notes Improvement

"Harlem health has improved in the last ten years more than health conditions in any other part of the city," he said. "But there is still ground for improvement."

Born in Washington in 1905,

son of Prof. C. I. West of Howard University and Rebecca West, school principal, Dr. West finished Howard University Medical School, interned at Freedmen's Hospital finishing there in 1930.

Then he went to Ethiopia, where he directed public health activity until 1931. He returned to Washington, took the civil service exam for medical officer and won the post as assistant medical officer at Veterans' Hospital at Tuskegee.

### Named District Health Officer

In 1935, he took another examination in New York and was appointed district health officer in 1936.

He and Mrs. West have a daughter, Barbara, 4, and live on West 110th Street.

He believes that "our health problems are not syphilis, tuberculosis and infant mortality, but education, employment and medical care"—preventive programs.

### Socializes Little

An Omega Psi Phi man, Dr. West socializes little, but is fond of golf, fishing and hunting and, as aforesaid, his hobby is wood-working in his shop here at the center. He goes to theatres and movies once in a while and loves travel.

"I am always going somewhere," he said. He has toured Europe five times and takes long trips by plane.



DR. JOHN B. WEST

# HARLEM HOSPITAL INTERNES AFRAID TO ANSWER AMBULANCE CALLS. MAYOR SAYS

## Harlem's Reputation As A Crime Center Discussed At City Hall Meeting

By WILLIAM E. CLARK

So much unfavorable publicity has been given Harlem as a crime center that several new internes (female) have refused to take their turn in answering calls with the Harlem Hospital ambulance service, it was disclosed last week. The hospital superintendent has asked that a policeman accompany each ambulance call so that protection could be given the internes, but the Mayor has refused to believe this service necessary.

The condition was disclosed at City Hall on Friday when in a conference with a representative group of Harlem citizens, Mayor LaGuardia asked for suggestions on how best to allay this fear on the part of the internes. The Mayor admitted that the fear on the part of the out-of-town internes was due more to Harlem's reputation as a crime center, as published in the daily press, than to any overt acts. He said he felt, however, every effort should be made by the responsible citizens of Harlem to see to it that no harm comes to doctors, nurses and others who go into the tenements on errands of mercy.

Several of those who heard the Mayor's statement pointed out that Dr. Myra Logan, Dr. Stephanie Davis and several other Harlem physicians had taken their internship at Harlem Hospital, made the rounds on the ambulance without having been pushed around by strangers. They expressed the opinion that the new internes would get over their timidity after they had lived in the hospital for a while.

When asked for specific instances of internes having trouble in Harlem, the Mayor said that most complaints had been due to arguments between the physician and patient as to whether the case was of sufficient importance for hospitalization, or instances where the patient wanted to enter some other hospital instead of Harlem.

The Mayor's attention was called to the fact that there were many com-

plaints of discourtesy and some inefficiency on the part of internes who sometimes refused to admit cases that later proved to be in dire need of hospitalization. But His Honor discounted any suggestion that hostility was in anyway due to the internes, themselves.

He made it clear that he did not believe Harlem was any different than other parts of the city but that this section had gotten such a reputation abroad for crime that there weren't many white people who thought as he did.

Police Inspector John J. Butler, in charge of the 6th Division, was questioned on the crime situation in Harlem and he denied the oft published statement that "Harlem had a murder a day". Most of the crimes of the neighborhood were petty ones; that most of the so-called murders were emotional crimes (manslaughter) and were not nearly as frequent as reported. He pointed out that unlike some other sections of the city Harlem was free from gang rule and that there was comparatively little organized crime in the territory.

### Discusses "Slave Markets"

Walter White, executive secretary of the National Association for the Advancement of Colored People, brought up the economic condition of the people of Harlem and inquired what was being done to put an end to the so-called "Slave Markets of the Bronx," where Negroes seeking domestic employment congregated and wait for Bronx housewives to give them days' work. Investigation has shown that so anxious are most of these people to work that they have been known to accept jobs for as little as 15c per hour.

The Mayor said that in his opinion this was a labor problem and that he suggested that the State Employment Service open an office in the neighborhood where the domestics could register for jobs and where the employers would be forced to pay the minimum wage rate. He gave assurance that this matter was being adjusted.

At the same time the Harlemites assured the Mayor that they would do what they could to allay the fears of the Harlem Hospital internes and to see that no harm came to them while on ambulance duty.

Sitting in on the conference with the Mayor were: Police Inspector John J. Butler, Acting Police Captain

Samuel J. Battle, Judge Myles A. Paige, Judge Jane Bolin, Ashley L. Totten of the Brotherhood of Sleeping Car Porters, Tax Commissioner Hubert T. Delany, the Rev. John H. Johnson, police chaplain; Walter White of the N. A. A. C. P., Earl Brown of the Amsterdam News and William E. Clark of The Age.

## HARLEM HOSPITAL PROBE EXPECTED MOMENTARILY

### Mayor Acts On Request Of The New York Age To Clean Up Hospital

5-4-40

Whether or not Harlem Hospital, otbed of a thousand complaints of egligence and inefficiency, is cleaned from the inside, the institution certainly got a thorough going-over Tuesday morning.

Incentive for all the sudden conscientious activity was apparent when it was discovered by The New York Age that hospital authorities had learned via the grapevine that Mayor Fiorella H. LaGuardia intended to swoop down upon them for a surprise visit and tour of inspection.

Cause for the Mayor's plan may be found in a letter sent the city's Chief Executive by The New York Age Editor, Fred R. Moore, in which Mr. Moore requested a searching probe into conditions at the hospital. The letter dated March 26 brought a reply from City Hall last Thursday in which the Mayor stated he has carefully examined claims in Mr. Moore's letter and also charges contained in recent editorials carried in this newspaper. Included in the Mayor's communication was a detailed report of the Medical Superintendent of the Hospital from the files of Commissioner of Hospitals, Dr. S. S. Goldwater.

In the above report Superintendent Magelener refuted claims of The

were seen going through all the motions of inspecting the place—if only the first floor—while awaiting the expected surprise arrival of the Mayor.

It is very possible that the Mayor will not show up for some days. He may barge in at midnight upon the unsuspecting authorities of the institution. One thing is certain. Harlem Hospital will be a little more ready for him when he does come than heretofore. And incidentally, they may be a little better prepared to go efficiently about the business of ameliorating human misery and tending to the wounds and pain of the afflicted.

Age and its publisher that the hospital is understaffed; that ambulance surgeons allow calls to accumulate and do not leave the hospital to make their calls until they have four or five; that supervision of entrances and exits is lax and that the general physical condition of the hospital is poor, halls and walls being badly in need of painting and floors being very dirty.

Replying to The Age's complaint that the Harlem Hospital system makes it increasingly difficult for Negro internes to qualify, Magelener said in his report that Negro internes do not apply. He cited the last internships examinations to the Hospital, stating there were no male Negro applicants present and only two female, both of the latter having been accepted.

### Dump Garbage On Patient

Fuel was heaped on the heat of the situation when only this week the Department of Public Works issued a report concerning the condition of elevators and lifts in the city wherein it was revealed that recently at Harlem Hospital just after a patient had been rolled into the elevator on the way to an operating room, a load of garbage was pushed in too, some of it spilling on the patient.

All the activity at Harlem Hospital seemed "love's labor lost" however for despite feverish activities in all departments and watchful waiting at the corridors, the Mayor failed to show up. The only person who did show up as Commissioner Goldwater who must himself have been surprised at the efficient hospital-like place Harlem had become in a matter of hours. Goldwater and Harlem Hospital's superintendent

# Negroes Disappointed Over Naming Of Another White Assistant Supt. To Harlem Hospital In Expansion

Keen disappointment was expressed in medical circles in Harlem this week over the failure of the Department of Hospitals to name a Negro to the position of assistant day superintendent of Harlem Hospital, what is said to be an expansion program in the administrative staff at the hospital. A white doctor, Dr. Jacob Goldman, was named to the post.

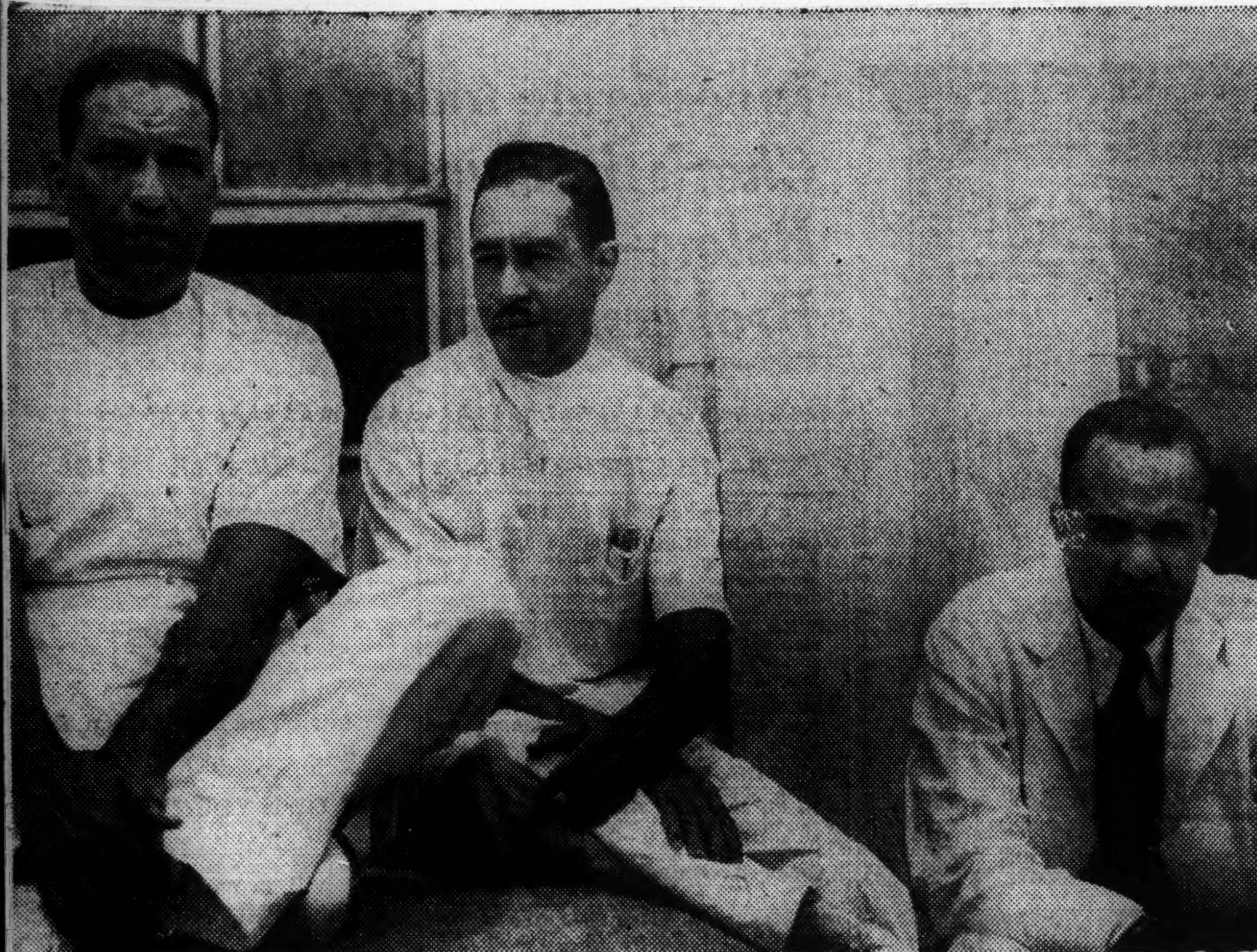
And unless Harlem's doctors and citizens exert pressure on downtown officials and on the hospital's medical board there is a possibility that further additions to the staff will also be white and Negroes will be "left out in the cold."

Rumors that two more ambulance surgeons (paid) and two or more admitting physicians will be named to the hospital were confirmed by Dr. Israel Magelaner, superintendent, when questioned by The New York Age. The appointments, he said, will come after recommendations by the hospital's medical board. There are now no paid Negro ambulance surgeons at the hospital and whether there will be appointed Negroes to those posts rests entirely with the medical board, Dr. Magelaner said.

At the present time the hospital's sole Negro member on the executive staff is Dr. Clarence Chambers who last year was appointed assistant superintendent in charge of night work. Another Negro, William Traynham, holds a semi-executive position as a liaison officer assisting Dr. Magelaner and it had been hoped by Harlemites that he would receive the promotion as assistant superintendent.

While medical men would not allow their names to be used, it was learned that they plan to meet shortly to discuss the various charges made against Harlem Hospital's administration by The New York Age.

Winston-Salem, N. C., Sentinel  
July 7, 1940



THE COLORED HOUSE STAFF for the Kate Bitting Reynolds Hospital has been completed. Shown above, left to right, are:

Wilson, N. C. Wkly. Times  
July 12, 1940

## HUEY DEDICATES NEW BUILDINGS NEGRO HOSPITAL

New Buildings and Renovations at State Hospital for Negroes in Goldsboro Cost Around \$1,000,000.

Goldsboro, July 11.—(AP)—Gov. Hoey declared today that North Carolina "is not doing enough" in ministering to its unfortunates as

Dr. W. M. Bryant, intern, of New York city; Dr. Guardeau Alexander, intern, of Greensboro; and Dr. Cornelius J. Beck,

he dedicated new buildings and renovations costing around \$1,000,000 at the state hospital for negroes.

He urged that greatly enlarged facilities be provided for mentally affected children.

The governor described the fireproofing of the state hospitals at Morganton, Raleigh and Goldsboro as "the ranking accomplishment" in the state's \$16,000,000 building program.

"All the people of North Carolina can sleep more securely at night in the consciousness that the helpless people committed to these various hospitals are occupying fire-proof rooms," said the governor, "and have been made secure from the danger of a calamitous fire."

Enlargement of the institutions makes room for nearly 1,000 more inmates, Hoey said.

intern, of Georgetown, S. C. All are from the Meharry Medical College at Nashville, Tenn. —(Staff Photo.)

Charlotte, N. C., News  
July 18, 1940

## Negro Ward Will Open

Sanatorium Wing Is Nearing Completion

The new \$35,000 Negro ward of the Mecklenburg County Tuberculosis Sanitarium will be completed this week-end, it was announced today by Dr. Hillis L. Seay, Superintendent.

Formal ceremonies have been planned for Wednesday, July 24, when the County Commissioners will meet with the Sanatorium's board of managers at 11 A. M. for a final inspection.

Lunch will be served the members of the two boards at noon.

Authorities hope to have patients in the new structure within a few days, Dr. Seay said.

Designed to meet the long-standing community problem of high tuberculosis rates among the Negroes, the building was authorized by a special vote of the citizens of the county last June 27 which set the maximum tax rate for the support and maintenance of the Sanatorium at 10 cents.

It will accommodate about 60 patients, double the number cared for in the past, and will enable everyone on the hospital's waiting list to gain admittance for treatment.

New, modern in every respect, and fireproof, the building is a valuable addition to the hospital's plant.

## Negro Operating Room At Columbia Hospital Is Now Air-Conditioned

H. H. McGill, Columbia hospital superintendent, said yesterday the major operating room of the Negro division of the hospital had been air-conditioned.

The five operating rooms in the white section of the institution were air-conditioned some time ago and there is only one operating room not equipped with this service, a minor room in the Negro division.

# \$634,000 REQUESTED FOR NEGRO HOSPITAL

GOLDSBORO, N. C., Aug. 22. (ANP)—Requests for \$634,000 to complete the safety and expansion program of the State Hospital for the Colored Insane here, have been approved by the board of trustees of the hospital, and the next legislature will be asked to appropriate that amount.

New buildings planned include a \$200,000 three-story, 300-bed building; a \$125,348 three-story, 143-bed dormitory for male patients to replace the condemned Aycock and McKinne buildings; a \$125,933 three-story, 212-bed building to replace the old epileptic building; fireproofing the Miller building for female patients; electric generating equipment, a new boiler, and other power plant equipment costing \$113,500. A million-dollar State PWA program of expansion and improvement has recently been completed at the hospital.

# Hospital To Become Medical Center Unit

Administration Of Memorial Will Take Charge Of Operation Of Good Samaritan October 7—Improvements Costing About \$50,000 Planned.

Good Samaritan hospital, which for more than 50 years has ministered to the needs of Negroes in distress, will on October 7 become a part of Charlotte Memorial hospital. On that day, the opening of Memorial hospital, its administration will take over charge of operation of Good Samaritan, which was the first hospital established in the United States for treatment of Negroes.

Except that Good Samaritan will remain at its present location, the practical result will be the same as if it were actually on the Memorial hospital grounds. Fred M. Walker, administrator, will head the management of both institutions. The resident medical staff of Memorial hospital will perform similar duties for Good Samaritan as will the visiting medical staff, assistants, and supervisors.

Improvements at Good Samaritan are planned by the new administration, and from \$45,000 to \$50,000 will be expended in betterment of facilities there, including a complete out-patient department with dispensary and clinic service, auxiliary X-ray department, isolation divisions, and quarters for resident physicians. The Negro physicians who now make use of Good Samaritan's facilities for their patients will have appropriate working contacts with the visiting staff, and other necessary relations will be observed throughout in the operation of Good Samaritan hospital.

## HAS FINE RECORD.

Good Samaritan has a record of fine achievement. The growth made in its 51 years has been steady, supported and controlled by the Episcopal diocese of North Carolina and by many substantial gifts made by individuals and Episcopal churches. Its board of managers has always been composed entirely of women who gave freely of their time and resources to the work of the hospital. It was established primarily through the efforts of the late Mrs. John Wilkes, and the work has been carried forward by others throughout the years.

The present structure, a three-story brick building, contains 100 beds. Improvements of which the board is especially proud include the maternity unit, set up in 1935. It is thoroughly modern, with a capacity of 15 mothers and infants. Seven hundred babies have been born in the maternity section, nearly all of them charity cases.

funds, as well as securing many substantial gifts from others for the hospital. Mrs. Marshall has served on the board for the last 26 years. For the last 10 years she has been president of the board and before that was chairman of the finance committee.

Other officers and board members are Mrs. M. M. Murphy, vice president; Mrs. J. S. Gaul, secretary; Miss Emma Hall, treasurer; Mrs. George P. Wadsworth, Mrs. W. A. Avant, Mrs. Minta Jones Hull, Mrs. Joseph Garibaldi, Mrs. E. A. Penick, Mrs. H. M. McAden, Mrs. W. H. Williamson, Jr., and Mrs. Stanley W. Black, Jr.

Charlotte, N. C. Observer  
September 28, 1940

Good Samaritan hospital was established as a charity hospital and for many years nine-tenths of its work was charity in nature. Even now 80 per cent of its services are for charity patients. It began as a four-room building and grew into its present size through expansions in 1925 and 1929, the latter including a nurses' home. Further expansion was made in 1938. The present building and equipment represent an investment of \$225,000. Aside from its work of a healing nature, Good Samaritan hospital has been a great factor in bringing about good feeling between the races. The Negroes of Charlotte recognize Good Samaritan as their best friend here, Miss Emma Hall, treasurer of the board of managers, said. This good will has been secured over the years because of the unselfish service given.

## NURSES IN DEMAND.

The cornerstone of the building was laid December 18, 1888, and together with hospitalization went plans for a training school for nurses. Six to 10 have been graduated each year, and the demand for Good Samaritan trained nurses is more than can be filled, Miss Hall said. At present the hospital has 10 nursing supervisors and 22 student nurses.

Funds for operation have always been obtained from contributions, local and within and without the state. The Duke Endowment regularly allocates funds for charity work of the institution. Corporations and contractors pay for some hospital cases among their employees, and some Negroes are able to pay, but the reason for the establishment of the hospital and for its continued operation is the need of Negroes unable to pay for hospitalization.

Mrs. E. C. Marshall is president of the board of managers and has given unfailingly of her time and thought and generously of her

## Negro Citizens Give Radio to Sanatorium



Negro patients in the Wake County Sanatorium are now enjoying radio through individual headphones donated by Negro citizens of Raleigh. Marking the completion of the installation of the radio at a cost of \$225, open house is being observed at the Sanatorium between 3 and 5 p. m., Sunday, to which the public is invited. Payment for the radio was guaranteed by the Negro Citizen's Committee of Raleigh, of which J. W. Yeargin is chairman. The local Delta sorority is in charge of solicitation of funds. Shown enjoying the new installation, which provides headsets for 35 listeners, is Charles Young, in bed, and James Braswell, seated.

Burlington, N. C. Times-News  
December 16, 1940

### REPORT ON CAMPAIGN FOR NEGRO HOSPITAL

More Than \$800 In Cash, Pledges  
Acknowledged; Lot Donated For  
12 Bed Project

More than \$800 had been raised in cash and pledges today toward the financing of the proposed Alamance Missionary hospital, Dr. J. H. Pittman reported this morning. Another general mass meeting in the interest of the drive is scheduled early next month, Dr. Pittman said, and efforts will be made to begin construction at a site on the Glencoe road early in the spring. Approximately \$12,000 is needed

to complete the financial arrangements for the project, which is calculated to lift the burden of care of negro patients off other hospital facilities in this section.

Land for the structure has already been donated, and Dr. Pittman said this morning that preliminary sketches for the proposed 12-bed institution had already been drawn up by Architect Bruce Caughen for study by members of the hospital committee and for the preparation of working drawings.

Greensboro, N. C. News  
December 17, 1940

### NEGRO HOSPITAL DRIVE LAUNCHED IN ALAMANCE

(Special to Daily News)

BURLINGTON, Dec. 16.—More than \$800 had been raised in cash and pledges today toward the financing of the proposed Alamance Missionary hospital, Dr. J. H. Pitt-

man reported this morning.

Approximately \$12,000 is needed to complete the financial arrangements for the project, which is calculated to lift the burden of care of negro patients off other hospital facilities in this section.

Land for the structure has already been donated.

December 1, 1940

## A DISGRACEFUL CONDITION

For years now the people of Asheville have been talking piously about the need for more adequate hospital facilities for the Negroes. The net results of all of this discussion is the simple but ugly fact that the situation today is just as appalling as it ever was.

Here are the disgraceful conditions:

Asheville has five hospitals with 341 beds, exclusive of beds for babies. From four of these hospitals Negroes are excluded altogether although they constitute a full third of the city's population. They are admitted to only one hospital which has allotted 18 beds to them. Expressed in rough figures, this means that while there is one hospital bed for every one hundred white residents, there is only one hospital bed for every one thousand Negro residents.

If the Negro were free from the ills and accidents that afflict the rest of the human race, there might be some plausible justification for such shocking favoritism. But unhappily neither disease nor death knows any color line or obeys any Jim Crow laws. The Negro is born of woman, he lives, he sickens and he dies. His life can be prolonged by hospital care. Denied such hospital care, he dies and in dying reproaches the community for the cruel neglect visited upon him.

For this deplorable situation, the Negro is in no wise to blame. He is helpless, pitifully helpless. There is nothing within his power that he can do to remedy the barbarous conditions. He has to take what we of the white race give him. He lacks the money to build and maintain his own hospitals. Disfranchised, he can't storm the city hall or the courthouse and demand more consideration. The social lines which we draw—and necessarily draw—eliminate him from all participation in those luncheon clubs and the like which exercise so much influence over the life of the community.

The utterly helplessness of the Negro increases the responsibility of the white man. We of the white race have built the hospitals. We have determined whether Negroes shall be admitted to them. We have made the decision which allots only 18 beds to them. If there be credit, it is the white

man's credit. If there be blame, it is his blame. Tragically enough, it is blame, terrible blame in this case.

Let's not misunderstand one another: no question of social equality is involved in this problem. It is not a case of treating the Negro as a social equal. Rather is it a case of treating a humble and helpless people with justice and decency and humaneness.

Who is to blame? Many persons, many organizations, many groups are to blame. In some ways, the whole white race of Asheville is to blame for we have complacently accepted a condition which we could have bettered and which impeaches our right to be classed as a truly civilized community.

First of all, let us hasten to confess: The Citizen and The Times are culpable, gravely culpable. We admit with shame that we have not done the things which we should have done. Above all, we have failed lamentably to insist in season and out that the grievous situation should be remedied. We have contented ourselves with an occasional editorial, expressing the hope that something would be done by somebody at some time. We admit that this is not very flattering unctio to lay to our journalistic soul.

The white physicians are blameworthy because they have not emphasized to all of us the utter indecency of the hospital situation as it related to the colored race. Is it too much to expect doctors to show leadership in such matters?

The city and county governments are very properly subject to criticism for they have not acted themselves or inspired others to act. Local governments have very direct and inescapable responsibilities in insuring adequate hospitalization of all of the people, including Negroes.

The governing bodies of the various local hospitals are not without sin in this situation. They have failed to take a sufficiently broad view of their opportunities and responsibilities.

The white churches are to blame for they have permitted a most unchristian condition to persist in this community. If the Christian faith does not move us to do our full duty by humble and helpless people, then we have missed the path on which

the Man of Galilee walked and beckoned us to follow.

What is here written may appear harsh. It is not so conceived. We are merely trying to see this distressing situation from the viewpoint of the Negro. We are merely endeavoring to say for him some of the things which he might say for himself if he were not so humble and so inarticulate. That such neglect has not embittered him against his white neighbors speaks volumes for his kindly and understanding disposition.

The dreary fact remains that it is a barbarous condition which we of the white race are thoughtlessly tolerating. As a civilized, Christian and democratic people we should not rest until it has been corrected. Talk will not remedy it: work and money will be required. But the good that can be done will richly repay all of the work and all of the money that we may devote to it.

Asheville, N. C. Times

December 7, 1940

## Hospitalization For Negroes

The plight of oppressed minority races in Europe properly arouses humanitarian sentiments amongst the people of Asheville. But now, in a new Asheville mood, which is a part of the new American mood born of the world crisis, Asheville is concerned as never before over the housing and hospital conditions among the Negroes of the city.

A city ordinance and a local Housing Authority are directing efforts toward better housing. But only the joint efforts of all public agencies, all civic organizations and individuals can solve the too old problem of utterly inadequate hospital facilities for the Negroes.

Expressing the situation in figures, it means one hospital bed for every one thousand Negroes, whereas for the Whites here is one bed for each one hundred. It is time for humanitarian sentiment to go to work at home.

At its Thursday meeting, the Rotary Club, long a worker and frequent spokesman for better hospitalization among the Negroes, indorsed the editorial in last Sunday's Citizen-Times and recommended the appointment of an all-Asheville committee to carry the desultory discussion of many years into action. Steps to this end are being taken, and later will be announced.

Dec. 17, 1940-

## Money Toward Proposed Negro Hospital Raised

BURLINGTON, Dec. 17.—Dr. J. H. Pittman, local negro physician, reported today that more than \$800 had been raised in cash and pledges toward financing of the proposed Alamance Missionary hospital. Another general mass meeting in the interest of the drive is scheduled early next month, Dr. Pittman said, and efforts will be made to begin construction at a site on the Glen-coe road early in the spring.

Approximately \$12,000 is needed to complete financial arrangements for the project, which is calculated to lift the burden of care of negro patients off other hospital facilities in this section.

Asheville N. C. Citizen  
February 16, 1940

Charlotte N. C. News  
February 5, 1940

## Rotary To Survey Hospital Facilities For Negroes Here

Barwick Is Chairman Of Committee Named  
To Make Study; Playground Situation  
Also To Be Investigated By Club

A survey and study of hospital facilities for Asheville negroes will be undertaken by the Asheville Rotary club, it was revealed at yesterday's luncheon meeting at the Battery Park hotel.

Howell C. Barwick, manager of the Asheville office of the Southern Bell Telephone company, has been appointed chairman of a committee to make the survey. Dr. Edward Schoenheit and Gustav Lichtenfels will serve with Mr. Barwick on this committee.

It was pointed out at yesterday's meeting that inadequate hospital facilities for Asheville's negro population warranted a complete study of the situation for the purpose of bringing the matter before the city and county officials, civic clubs and other organizations interested in the plan.

Mr. Barwick and his committee will meet within the near future to discuss plans for the survey and make a report to the Rotary club.

The need of neighborhood playgrounds in Asheville, providing some place other than the streets for children to play in, thus preventing needless accidents, will be investigated by a commission appointed by the Asheville Rotary club.

Howard G. Etheridge heads this group to study and report back to the club the possibility and feasibility of establishing such neighborhood playgrounds.

Serving with Mr. Etheridge are Dr. Walter T. McFall, Ottis Green, Charles M. Britt, and the Rev. Walter Stanbury.

### Will Seek Play Lots

The commission will investigate the possibility of securing vacant lots in various sections of the city where children of the neighborhood may play. It has been called to the attention of the commission that possibly the city owns or controls suitable undeveloped property which might be cleaned up and prepared for such neighborhood play lots.

The neighborhood playground commission has also been asked to consider the feasibility of establishing several places in the city where sleds and coaster wagons may be enjoyed without danger of interference from

## Plans For Sanatorium Negro Wards Complete

Will Be Submitted To Managers At  
Meeting Wednesday Afternoon

Plans for the new Negro ward at the Mecklenburg County Sanatorium have been completed and will be submitted to the Sanatorium board of managers at its regular meeting Wednesday afternoon for approval.

Architect W. H. Peeps appeared before the Board of Commissioners this morning and reported the completion of the plans. He was instructed to place them before the hospital managers first, after which the commission would authorize the building to be started.

The new building has been needed for a long time to take care of the large number of Negro tuberculosis patients in this county. For the past few years, the waiting list has been large with an unusually large number of deaths occurring because the ill persons could not gain admittance to the institution.

Funds for the new building were authorized by the voters last June 27 in a special election. Action was held up pending the settlement of court litigation brought by Dr. Thomas J. Holton, but withdrawn about a month ago.

Architect Peeps said the addition will provide facilities for 59 patients in four solariums, two each for men and women, and five isolation rooms for men and the same number of rooms for women, each room providing for two patients.

He estimated that the construction cost will be between \$30,000 and \$35,000 and said that the contract will be awarded as soon as possible after bids are advertised for by the Sanatorium board. The plans will be submitted to the board Wednesday afternoon for the routine final approval, after which County Attorney Delaney will prepare the advertisement asking for bids by construction contractors.

Preparation of the plans was started in January, 1938, but progress in these preliminaries has been delayed by litigation and other causes.

In detail, the plans provide, in addition to the wards and isolation rooms, a large lounge, kitchen, dining room, nurses' rooms, linen rooms, janitor's supply room, several service rooms and adequate accommodations for X-rays and other equipment and for examination and treatment of the patients, Mr. Peeps explained.

## \$75,000 Offered For New Wing At Twin City Hospital

By J. ANDREW BOWLER  
Journal and Guide Staff  
Correspondent

WINSTON-SALEM, N. C.—The Honorable W. N. Reynolds has offered \$75,000 for an addition to the Kate Bitting Memorial Hospital for Negroes according to announcement made last week by Mayor James R. Fain.

Mr. Reynolds suggested that if the offer is accepted, a committee be chosen, members to be selected by the board and mayor, to plan details of the proposed structure.

Aldermen will consider this proposal at a very early meeting declared Mayor Fain.

It has been set out that this sum is sufficient to provide a five story wing, with twenty-six beds bringing the hospital capacity to 221 beds.

It has been a recognized fact for some time that the hospital has been accommodating more patients than were estimated when the original part of this unit was built and at present is crowded.

This offer, if accepted, will go a long way toward relieving the present congested condition.

# HOSPITAL WARD TO BE MOVED

CHARLOTTE, N. C., Mar. 21—A special committee was appointed Tuesday by the Mecklenburg County Board of Commissioners, to make arrangements for the immediate moving of the present ward for Negroes at the County Tuberculosis Sanatorium, so as to make room for the new Negro ward building which is to be constructed at a cost of a minimum of \$35,000.

In view of the fact that the removal of the present building to a temporary location nearby, must be carried out without the vacating of the structure where many patients are under treatment, many of them unable to leave their beds, the arrangements to be made will be of a special character which may necessitate engaging the services of an expert.

For years, the ward has been overcrowded and many persons needing to be treated have had to wait their turn. The new building will provide facilities designed to meet all present needs and those anticipated for years to come.

Charlotte, N. C., Times  
May 30, 1940

## NEW NEGRO WARD TO BE READY TO OPEN IN JUNE

Raleigh, N. C., News & Observer  
June 2, 1940

The new \$37,000 Negro ward is almost completed and will probably be ready for occupancy by the middle of June, according to Dr. H. L. Seay, superintendent of the institution.

Dr. Seay said that the opening of the new structure which raises the capacity of the Sanatorium for Negro patients from 27 to 60 will completely eliminate the large waiting list of tubercular Negroes and do much toward bringing under complete control the ravages of the disease among the colored elements of our population.

The new structure, being built on the site of the old wooden-frame ward, is a one-story structure, completely fire-proof and will be equipped with the newest devices for the treatment and cure of tuberculosis. Adjoining the main building, it will use the same kitchen, power and heating facilities.

### PAVING DRIVEWAY

The State Highway Commission is laying a hard-surface road from the highway around the front of the main Sanatorium building and back to the highway. This will cut down the problem of dust from the road.

Last summer and last fall the erection of the building was stymied by a tax suit which contested the validity of the election which authorized the county board to levy up to 10 cents on the \$100 property valuation for the support of the institution. The commissioners levied the whole ten cents, three of which were for the new Negro ward.

## NEGRO PATIENTS HAVE NEW HOME

### Preventorium Turned Over to County Sanatorium for Tu- bercular Sufferers

In the official opening of the Preventorium today as a wing of the Wake County Sanatorium for Negro patients, more space will be made available to fight tuberculosis, and a 16 year-old dream of the Raleigh Woman's Club will become a reality.

A number of the patients were moved into the new quarters yesterday by county sanatorium officials, and the remaining patients will occupy the newly-renovated quarters today.

In turning the preventorium over to County officials, the Wake County Tuberculosis Association makes possible accommodations for 30 other patients. While the work of the association in locating and bringing in from private homes those suffering from tuberculosis will be continued, they have turned over full duty of operation to the county organization.

It was back in 1924, when Mrs. Josephus Daniels was president of the woman's Club, and Mrs. H. L. Cohen was chairman of the Club Health Department that the first plan for a tubercular hospital was introduced. Taking over the sale of Christmas Seals, the club, under the leadership of Mrs. R. L. McMillan, set aside \$1,000 of the money raised for a hospital fund. Their first efforts suffered financial reverses, due to depressions and bank failures, but they continued to work toward a Preventorium.

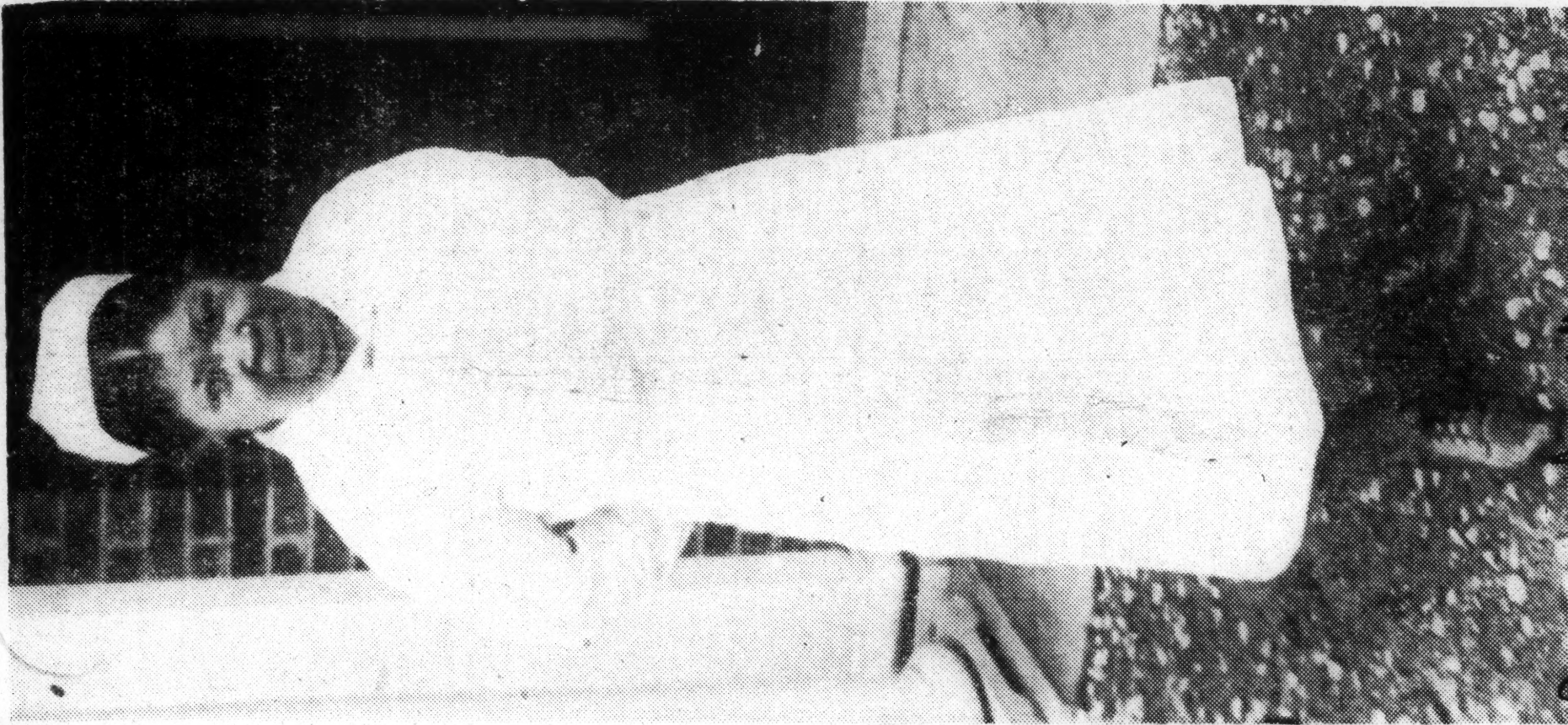
Several years later, through the cooperation of the Woman's Club, the WPA and Wake County, the Preventorium was built, and on May 22, 1938, it was dedicated.

The following Spring, the club's health department, led by Mrs. Paul Yelverton, chairman, with the cooperation of the Wake County Medical Board and the county board of health, initiated a plan for a county-wide tuberculosis association. It became the Wake County Tuberculosis Association, and assumed responsibility for annual seal sales, management of the Preventorium, and other details of the tuberculosis work.

Last Fall the association, with the

approval of the Woman's Club, decided to turn the Preventorium over to the sanatorium, to be used as a wing for Negro patients. Aided by the WPA, the association, under its new president, Mrs. L. P. Kennedy, and a committee composed of George Goodwin of Apex and Mrs. Paul Yelverton, has completely furnished and renovated the building. A heating plant and plumbing facilities have been installed, partitions put in to make four wards, and rooms for nurses provided. A corridor was built, connecting the new wing with the hospital, and the grounds have been landscaped. Miss Ida Trollinger, the first full-time tuberculosis nurse here, has been secured by the association.

While the county will have full charge in operating the preventorium, the Health Department of the Woman's Club will continue to cooperate with the sanatorium officials.



Miss Salome Taylor, who is superintendent of the new Community Hospital in Wilmington, N. C.

Charlotte, N. C., News  
January 11, 1940

## Ask Estimates On Proposed Negro Ward At Sanatorium

Hospital Board Ready To Go Ahead  
With Improvements To Cost About \$25,000

The board of managers of the Mecklenburg County Sanatorium, at a meeting yesterday afternoon, asked Architect W. H. Peeps to prepare cost estimates for a new Negro ward at the Sanatorium, and also the cost of brick veneering the present structure. These estimates will be received and studied at a special meeting called for next Wednesday afternoon.

The present Negro unit is a frame building and is too small to take care of the large number of patients on the hospital's waiting list.

While the Sanatorium officials are considering the two alternates, indications are that an entirely new building will be constructed, since the present frame structure will continue to be a fire hazard even if remodeled and veneered.

### \$25,000 ESTIMATE

Tentative discussions of a new building have centered around a one-story, fireproof structure to

Charlotte, N. C. Observer  
January 11, 1940

## BISHOPS DISFAVOR RACE SEGREGATION

Plans Approved for \$125,000  
Modernization of St. Agnes Hospital

Racial "segregation" within the Episcopal Church was disapproved here yesterday by the Joint Commission on Negro Work, an agency of the General Convention of the Episcopal Church.

Embodied in a resolution to be submitted to the General Convention at its triennial meeting next October in Kansas City, the disapproval was directed against a petition adopted last November by the bishops of 15 Southeastern dioceses.

The petition, also due to come before the General Convention, favors establishment of a Racial Episcopal Jurisdiction to administer the religious affairs of all Negro Episcopalians in the nation. A Negro bishop would be in charge.

Bishop Edwin A. Penick of the diocese of North Carolina, a member of the commission, said the petition was opposed incidentally because of

its "impracticality," but principally because, "from our point of view, a line of separation between the races is undesirable. We believe in one church for all races."

He added, also, that the Southern bishops, in their "ill considered" plan, had failed to provide any means of financing a separate jurisdiction for Negroes and had overlooked the difficulty of one bishop's attending so widely scattered a population.

Present as the commission went on record in its disapproval were three white bishops, the Right Rev. George Craig Stewart of Chicago, the Right Rev. William Scarlett of Missouri and the Bishop of North Carolina; a retired Negro bishop, the Right Rev. Edward Thomas Demby of Cleveland, O.; a Negro archdeacon, the Venerable B. W. Harris of Norfolk, Va.; two Negro clergymen, the Rev. Edmund H. Oxley of Cincinnati, O., and the Rev. George M. Plaskett of New Orange, N. J.; a white layman, Dr. Warren Kearny of New Orleans, La.; and a Negro layman, Lieutenant L. A. Oxley of Washington, D. C.

### St. Agnes Project.

Also taken up by the Joint Commission was a proposal for a \$125,000 program to modernize St. Agnes Hospital here. The proposal was unanimously approved and commended to the General Convention. It figured later in the day at a conference of the commission, said the petition here between Bishop Penick and Louis B. Franklin of New York na-

tional treasurer of the Episcopal Church.

Coincident with the Joint Commission's meeting was the opening at Christ Church of a two-day conference of a group of 45 lay workers and younger clergymen of Bishop Penick's diocese.

Bishop Clinton S. Quin of Texas addressed the conference last night. The meetings today will be held this morning at 10 o'clock and this afternoon at 3:30.

## A black and white photograph of a woman in a nurse's uniform, standing outdoors. She is wearing a white cap, a white coat, and a white skirt. She is smiling at the camera. The background is dark and indistinct.

Charlotte, N. C. Observer  
January 11 1940

**BISHOPS DISFAVOR  
RACE SEGREGATION**

**ns Approved for \$125,000  
Modernization of St.**

Racial "segregation" within the the Right Rev. William Scarlett of Episcopal Church was disapproved Missouri and the Bishop of North

[illegible]

approval was directed against a peti-white layman, Dr. Warren Kearny, who was elected last November by the New Orleans, La.; and a Negro bishop of 15 Southeastern dioceses, layman, Lieutenant L. A. Oxley of

The petition also due to come before the General Convention, favors the establishment of a Racial Episcopal Jurisdiction to administer the religious affairs of all Negro Episcopalians in the nation. A Negro bishop would be in charge. The proposal was unanimously approved and commended.

Bishop Edw'n A. Penick of the diocese of North Carolina, a member used later in the day at a conference of the commission, said the petition here between Bishop Penick and was opposed incidentally because of Louis B. Franklin of New York.

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10

Journal and Guide 1-13-48  
MISS SALOME TAYLOR, R.N. who is superintendent of the  
new Community Hospital in Wilmington, N. C.

# Institution Shows Great Progress Since Founded In 1920; 30 On Staff; Equipment Modern; New Building Accommodates 46

By A. A. MORISEY  
Staff Correspondent

WILMINGTON, N. C.—Citizens of Wilmington and vicinity can justly be proud of the new Community Hospital which was dedicated in July of 1939 by Governor Clyde R. Hoey. This institution which was founded in 1920 by a small group of civic minded individuals is very modernly equipped and offers the latest in facilities for any hospital need.

The original chartered trustees and founders were: the Rev. A. J. Wilson, Julius A. Murray, David Bryant, Dr. John W. Kay, the Rev. W. H. Moore, Thomas Hooper and Dr. Foster F. Burnett. Only the last three are living now.

City and county governments combined to furnish 55 per cent of the cost while the federal government furnished 45 per cent. The structure contains three floors and is of brick and frame construction. It has a capacity of 46 beds, with six bassinets, six private rooms and the remainder of the beds in the general wards.

## EQUIPMENT

There are in the structure, clinical and pathological laboratories, autopsy room, public lobbies, ample office space, rooms for major and minor operations, X-ray work, nursery activities, sterilization and facilities for delivery. It contains an electric self-service elevator, incinerator, steam heating plant, dumb waiter and mechanical ventilation for such rooms as the kitchen.

The superintendent of the hospital is Miss Salome Taylor, who has held her present position since 1922, having given unselfishly her life to the work of the hospital and to nursing school.

Dr. Leroy Upperman is resident physician and Dr. William E. Partee is interne. There is a staff of approximately thirty persons which includes: four graduate nurses, one technician, fifteen student nurses, one chef, two orderlies, one utility man and three employers at the laundry plant.

## PERSONNEL

Other facilities of the institution include, shower baths for both doctors and nurses on the third floor, a diet kitchen and utility rooms on each floor and an enclosed nursery to prevent visitors from handling new-born infants.

The active staff includes: surgical, Dr. H. A. Codington, Dr. E. Bullock, Dr. F. W. Avant, and Dr. F. F. Burnett; obstetrics, Dr. C.

E. Anderson, Jr., Dr. V. T. Sullivan, Dr. D. P. McEachern; pediatrics, Dr. McR. A. Crouch, Dr. John H. Sidbury; dentistry, Dr. S. R. Rosemand, and Dr. M. N. Leary.

Medical, Dr. D. C. Roane, Dr. P. A. Black, Dr. R. Fales, Dr. C. B. Davis; urology, Dr. W. C. Mebane, Jr.; Dr. R. B. Hare; eye, ear, nose and throat, Dr. S. E. Koonce, Dr. J. D. Freeman, Dr. F. O. Fay, and Dr. D. B. Sloan; X-ray and pathology, Dr. Graham Barefoot.

The consultant staff is as follows: surgical, Dr. J. E. Evans, Dr. J. F. Robertson, Dr. J. W. Hooper, and Dr. S. E. Koonce; obstetrics, Dr. H. Moore, Dr. J. B. Cramer, Dr. G. Johnson; medical, Dr. Harlee Bellamy, Dr. D. R. Murchison, and Dr. J. T. Hoggard; and urology, Dr. W. C. Mebane Sr.

Charlotte, N. C. Observer  
February 6, 1940

# Plans For Negro Ward At Sanatorium Complete

The county commissioners yesterday heard W. H. Peeps, architect employed to draw plans for the negro ward at the tuberculosis sanatorium, report that the plans are complete, deferred action on naming of an electrical inspector for the county, and named Mrs. M. B. Munn case worker in the juvenile court of Judge F. M. Redd.

The commissioners instructed the architect to submit the plans to the board of managers of the sanatorium at the meeting of that body Wednesday afternoon. The negro ward will cost about \$35,000 and was approved by the voters in a referendum last summer.

The commissioners received a petition signed by 52 persons in which protest against the appointment of an electrical inspector was voiced.

for weeks ever since the resignation of Miss Frances Gregerson who came here from St. Louis, Mo. The appointment of Mrs. Munn will be subject to approval of the State department which supervises the juvenile work.

# Wilmington Community Hospital Plant Pride and Joy of Citizens

## Sanatorium Doctor



DR. GORDON M. WILKINS who is the resident physician at North Carolina Sanatorium, Sanatorium, N. C. Dr. Wilkins is the son of Mr. and Mrs. Gordon Wilkins of Washington, D. C. He took his pre-medical work at Howard University and is a 1938 graduate of the Meharry Medical College, Nashville, Tenn. Dr. Wil-

kins did his interne work at Freedmen's Hospital in Washington and is an active member of the Omega Psi Phi Fraternity.

## NEGRO PHYSICIAN NAMED ON STAFF OF WHITE HOSPITAL

YOUNGSTOWN, Ohio —(ANP)—  
Appointed along with 97 white physi-  
cians, Dr. T. A. Lander last week be-  
came a member of the staff of the  
Mahoning County Tuberculosis Hos-  
pital marking the first time that a  
Negro has ever been appointed to the  
staff of that hospital.

Dr. Lander, a graduate of the 1922  
class of Howard University Medical  
School has built one of the largest  
practices of any doctor here in 6  
years. He is a member of the Ma-  
honing County Medical Association,  
the Ohio State Medical Association,  
and the American Medical Associa-  
tion.

Fraternally, Dr. Lander is an ac-  
tive member of the Alpha Phi Al-  
pha fraternity. He attends the But-  
ler Memorial Presbyterian Church  
and is a member of the West Federal  
YMCA.

# Hospital To Be Moved From Booker Washington Home To Comply With Court Order

**Board of Trustees Stripped of Power, E. J. Cain Recognized As President, Home For Aged Resumed**

## Atty. Amos T. Hall Will Appeal Case

New quarters for the Great Western Hospital will have to be found as the results of a decision made by Judge Frank P. Douglass in District Court Friday, April 5.

His decision held that the Booker Washington Home now housing the Great Western Hospital is a separate and distinct corporation from the Church of the Living God, Church of the Living God, the Pillar and Ground of the Truth, plain Truth, the name under which the tiff in the action and the Church combined group functioned.

of God, which He, Jesus purchased In the suit, The Church of The with His own blood, defendant. Living God, The Pillar and Ground

His decree gave right of possession to Booker Washington Home Amos T. Hall, Tusa, sought the the W. 55 feet including buildings management of the Booker Washington Home alleging that it was land involved is in He Jesus church not being used for the purpose name. E. J. Cain, though not gain- originally established. The Church ing any compensation for his per- of God, which He Jesus Purchased sonal funds which he allegedly put With His Own Blood disputed the into the project, was recognized merger of the bodies in 1926 and as president of the institution. The claiming full ownership of the court decreed the original officers \$20,000 worth of property involv- of the Home still the officers of ed, with Anthony Hightower the the Booker Washington Home. leading contender was represented Governing officials are to be taken in court by A. P. Van Meter. from the Church of God, The Pil- Attys. Bruce and Rowan repre- lar and Ground of the Truth." sented E. J. Cain and the Booker Washington Home the intervenor in the case.

Anthony Hightower, chairman of the Board of Trustees of the He Jesus church, which had charge of renting the property since it was taken out of litigation by the court, saw his sugar plum taken right out of his hand with the decision of the Judge Douglass which makes him and his associates without power over any matters regarding the home.

However, the thousands of dollars accumulated from royalty on the property is held by the Cushing Refining Company and will not be released until the litigation is ended. Atty. Amos Hall is basing his appeal on the fact that the court recognizes the merger of the two churches in the case and is claiming that the ownership of the property also passed

# Hospitals Plan Closer Tie-Up

PHILADELPHIA — A resolution approving the removal of the Convalescent Hospital for Colored Women to a site adjoining the Mercy Hospital at Fiftieth Street and Woodland Avenue, was unanimously adopted by the board of directors during a meeting, Thursday, at 1504-08 Catherine Street, it was learned Monday.

The action, which culminated two months of negotiations, was taken by the board of directors of the convalescent hospital to secure a more desirable location. The action is believed to be a part of Mercy Hospital's re-organization plan.

## Now Up to Mercy Board

In the event that the proposal is favorably acted upon by the board of directors of Mercy Hospital, the Convalescent Hospital will abandon the use of the buildings presently occupied at 1504-06-08 Catherine Street.

The institution was originally organized in 1904 as the Philadelphia Association for the Protection of Colored Women.

In 1930 the program of care and training of pre-delinquent girls was terminated and, after an amendment to the charter, it then entered into the present program of providing convalescent care for women.

## Follows 2-Month Study

Conferences between officials of the two institutions have been under way for the past two months and have led to the development of the present plans.

A director of the convalescent hospital said:

"An exhaustive study has definitely indicated that a location on the site contemplated will enable us to effect a substantial reduction in our cost of operation."

"At the same time, it will be possible for us to surround our patients with atmosphere much more conducive to a pleasant and speedy convalescence than is the

case at present."

The Rev. Henry L. Phillips, president of Mercy Hospital, is also president of the Convalescent Hospital.

## Cancel Hospital Founders' Day As Major Shakeup Of Board Of Directors Appears Imminent

## Rumors Place Dr. Henry M. Minton Among Those To Be Included In Staff Dismissals

Mercy Hospital will not celebrate Founders Day this spring which has been an annual historical event. These celebrations have been held under the auspices of women's auxiliaries, composed of from five to six hundred colored women of the Quaker City. But the auxiliaries, which have figured prominently in raising money for the institution, have not functioned for several months. The present indifference is reported to be due to a contemplated change of policy which will change control of Mercy hospital from white to colored.

Slated for removal from the hospital board are, Dr. Henry L. Phillips, retired archdeacon and former rector of the Church of Crucifixion, who has served as chairman for twenty-five years; John W. Harris, real estate broker, secretary for 30 years; E. T. Hinson, one of the founders, who has raised large sums, and John C. Asbury, prominent local politician. It is rumored that Dr. Henry M. Minton, one of the founders and who has been a big factor in the development and success of the hospital, is also slated for retirement as superintendent.

Mercy Hospital receives an annual appropriation from the State of Pennsylvania and contributions from the Philadelphia Community Fund. White members on the board associated with the Community Fund are said to be active in inaugurating a new policy.

## Lack of Hospital, Medical Facilities Cause High Death Rate - Walton

PHILADELPHIA, Pa.—(ANP) —Lack of more hospital and medical facilities is chiefly responsible for the Negro's high death rate from tuberculosis, pneumonia, heart disease and childbirth, Lester A. Walton, United States Minister to Liberia, pointed out in delivering the commencement address at the 29th commencement exercises of the Mercy Hospital and School for Nurses.

"The following facts and figures may be revealing and interesting," declared Minister Walton. "In the United States there is one hospital for each 107,000 colored, and one

hospital for each 19,000 white, there is one hospital bed for each 1,000 colored, and there are seven beds for each 1,110 white; there are 1.1 physicians and hospital beds available to each colored physician, and seven hospital beds available to each white physician.

"In the federal government's hospital construction program, the contemplated future opening of hospitals for Negroes under state, local and private auspices, and the campaign vigorously waged on behalf of preventive medical care, for me to venture the

prediction that there will be openings for 2,000 additional Negro nurses in the near future, should be no overstatement."

Minister Walton said it is encouraging to note that instead of merely viewing with alarm the high death rate of Negroes, officials of government and civic minded white Americans are beginning seriously to regard it as a community problem rather than solely the Negro's problem; for whenever the Negro's death rate is high the tell-tale figures have a direct bearing on the death rate of the community as a whole.

# Urges Negroes Make Use Of Philadelphia Hospital Plan

*Tribune*  
Unlimited Opportunities  
Offered, Mercy Hospital  
Head Says

*Philadelphia*  
Although the Associated Hospital Service covering the country and over 5,000,000 people are enrolled, Negroes are not taking advantage of it, John L. Procope, newly appointed superintendent of Mercy Hospital, 50th street and Woodland avenue, said last Monday.

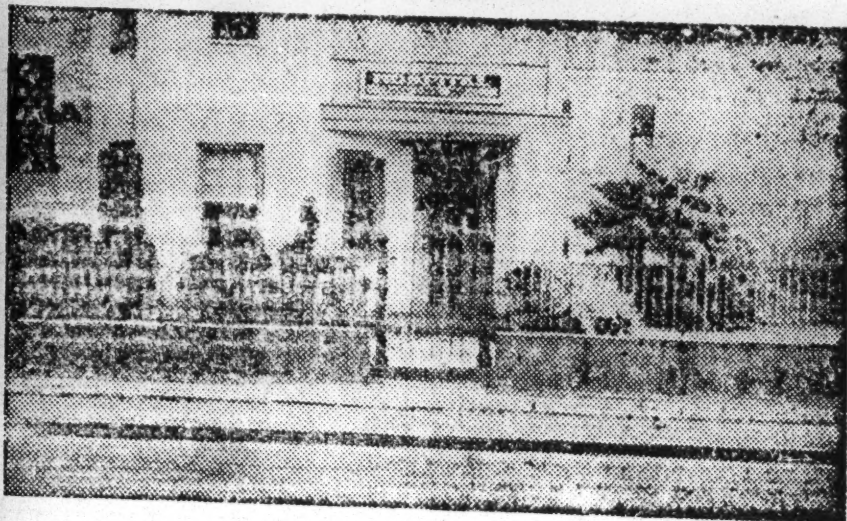
Procope was the principal speaker at a symposium on health sponsored by Rho Chapter of the Alpha Phi Alpha fraternity. He urged Negroes to take advantage of the many opportunities offered by the Association Hospital Service, of which Mercy is a member.

Dr. Frederick Douglass Stubbs, another speaker, said that heart disease was the cause of a large percentage of the deaths among physicians. He also revealed the fact that 82 per cent of the Negro population in Philadelphia uses white hospital and only 18 per cent the Negro institutions.

J. B. Deans, manager of the Philadelphia branch of the North Carolina Mutual Life Insurance Company, said that life insurance is the only plan that enables a man to save a cash estate in proportion to the valuation he places upon himself.

Among those present at the symposium were: Drs. Walter F. Jerrick, Robert P. Matthews, Kirksley Curd, Frank Christmas, Sylvester Smith, Arthur C. Scott, Thomas W. Georges, A. E. West, M. Norval Pannell, Percy I. Bowser, H. H. Stratton, Morrison Sallus, J. B. Lovell, Robert W. Henry, and Revs. John R. Logan, Jr., and Sr., Arthur C. Moore, Thomas S. Logan, Alton C. Berry, Herbert T. Miller, and Wilford Smith.

## Historical McLendon Hospital Outstanding Medical Service Rendered



new beds to be made available in general hospitals throughout the state are:

Aiken, Aiken county: Construction of a hospital building including necessary equipment at the Municipal General hospital, eight beds.

Greenville, Greenville county: Construction of a wing to a hospital building at the General hospital, 20 beds.

Laurens, Laurens county: Construction of a hospital building at the County General hospital, 8 beds.

Rock Hill, York county: Construction of a three-story building, 22 beds.

Summerville, Dorchester county: Construction of a hospital building at the County General hospital, 18 beds.

The complete staff of the McLendon Hospital are: Drs. J. A. C. Jackson, W. H. Miller, W. H. Felder, J. I. Hoffman, W. M. Thorne, H. B. Purcell, A. G. Purvis and Mrs. A. B. Harrison, clerk and pharmacist.

The hospital is supported from the revenue of private income thru its private patients, the Duke Foundation and The Charles W. Wolford Board, also Community Chest.

Spartanburg S. C. Herald  
January 8, 1940

## NEGRO HOSPITALS TO GET NEW BEDS

Laurens, Greenville and York Counties Included In PWA Loan List

By O. L. HUME  
(Herald Washington Correspondent)  
Washington, Jan. 7.—Negro hospitals in South Carolina have been provided with grants and loans from the Public Works administration which will enable the addition of a total of 716 new beds, it was shown in a report made to Col. E. W. Clark acting commissioner of PWA, by W. J. Trent, Jr., adviser on negro affairs.

Six hundred and forty of the new beds will be provided at the State Hospital for the Insane at State Park, Richland county, through construction of three ward buildings and a well in the section for negro patients.

The locations, purposes for which the grants will be used, and number

of new beds to be made available in general hospitals throughout the state are:

Aiken, Aiken county: Construction of a hospital building including necessary equipment at the Municipal General hospital, eight beds.

Greenville, Greenville county: Construction of a wing to a hospital building at the General hospital, 20 beds.

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## White S. Carolina Shriners Praised For Children's Aid

GREENVILLE, S. C.—(AP)—One of the South's outstanding private philanthropies and one that has won widespread praise is the Shriners Hospital for Crippled Children here—as a hospital that gives needed medical and surgical treatment to lame, crippled children, regardless of race, color or creed.

Admission to the hospital is based purely on the question of the need for the treatment, and inability of the child's parents to provide the treatment. Most of the patients are white, but there are usually a number of colored tots having their twisted limbs straightened or diseased bones made healthy. The hospital has an average of about 60 patients at a time. Miss Lousilla Scheleman is the superintendent and Dr. J. Warren White is chief surgeon. Explaining the splendid work being done at the hospital by the Shriners, a prominent Greenville resident said this week:

"At the Shriners Hospital—except in the children's classroom work which South Carolina law demands must be separate—there is absolutely no segregation in the

wards. A white child in one bed and a colored child in the next is the general rule. Of the five thousand children treated in the last 13 years, over 700 have been colored. On the days that open house is held the white society women vie with each other to play hostess to the colored kiddies."

Columbia, S. C. Record  
April 16, 1940

## Hospital Board Adopts Plan For 110 More Beds

Delegation Agrees to Offer Bill to Allow Addition Costing \$425,000

Plans for an enlargement and remodeling program at the Columbia hospital, costing \$425,000 and increasing the capacity by 110 beds, have been approved by the Richland county legislative delegation. The delegation has agreed to introduce a bill in the legislature authorizing the county board of commissioners to borrow \$425,000 for this program.

Meeting with the hospital board yesterday afternoon, the delegation heard Robert Lafaye of the architectural firm of Lafaye, Lafaye and Fair outline three plans after which the hospital board adopted one.

The plan adopted provides for converting the negro unit into a white unit and constructing a building that would join the present negro unit to the main building.

It also provides for the erection of a negro unit and a negro nurses' home on the property south of hospital that was purchased last year.

Under this plan the boiler plant would be enlarged, the capacity of the white nurses' home would be increased and the wings of the old building, south of the new structure, would be abolished.

Mr. Lafaye pointed out that this work would cost about \$389,100 and that it would require about \$40,000 more to equip the new buildings.

The architects said that the actual bed capacity of the hospital was 231, exclusive of the bassinets. He said that there were approximately 300 beds in the building at present, adding that it was much overcrowded.

The new section has 84 beds, the old building has 72 beds and the negro unit has 75 beds.

Plans approved by the delegation also provide for 50 rooms at a maximum rate of \$3.50 per day. Under the plans adopted, Mr. La-

far pointer out that future expansion had been provided for. The present building of the hospital was constructed in 1923.

Housed in a four-story 23 room historic confederate mansion with grounds that glisten with landscape beauties of nature stands the McLendon Hospital a memorial tribute to its founder the late Dr. A. A. McLendon. This property was bought by him in the name of the "People of Charleston" as saving sellers of this valuable property who were of a philanthropic mind assurance that it would always be used as a hospital for treatment and housing of Negro patients. This property can never be sold or mortgaged.

Complete facilities for the housing of the 36 patients are to be provided including a nurses dormitory that houses twelve nurses in present staff. Located on the first floor of the building are the out patient waiting room, Examination Room, Consultation room, Dispensary. Male and female wards are on the second floor together with a rising annex that is used for the operating room and private wards. To be found on the third floor beside the six private sick rooms are

the maternity ward, the beautiful roof garden which is used for a sun porch and palace of convalescence in the better seasons of the year.

Dr. Seabrook the medical director in complete charge of the Hospital stated in an interview to the Press, That during the year of 1933, the hospital took care of 7,616 people coming to them for treatment. Modestly he stated, "The physicians of Charleston have given considerable help to our programme of social and hygiene betterment of local health conditions, and are to be praised considerable for their assistance. We performed over 70 major operations at our clinic and are well pleased over the results."

Assisting Dr. Seabrook in this work are Drs. T. C. McFall, specialist in surgery and teacher in the training school. Dr. B. Burroughs, Chief of the Outpatient department and Dr. H. T. Holloway also W. H. Miller assisting him. Dr. Burroughs stated that from present advice

Charleston, S. C., Evening Post  
May 13, 1940

## HOSPITAL DAY OBSERVED HERE

Roper Open to Inspection  
by Public During  
Afternoon

Roper hospital this afternoon is observing National Hospital day.

Visitors are inspecting the facilities of the institution on the occasion, which is celebrated all over the country in connection with the birthday anniversary of Florence Nightingale, famous Crimean war nurse.

Many special exhibits and displays were in the hospital's various departments, and visitors were invited to see the actual workings of the county institution.

The following tour attracted visitors: The out-patient department, the emergency room, the education department, the colored medical ward, the colored surgical department, the obstetrical and gynecological department, the white surgical department, the white medical department, the diet kitchen and dining room, the main kitchen, the supply room, the X-ray department, the heart station and the operating room.

Columbia, S. C. State  
July 22, 1940

**COLUMBIA** . . . About two years ago, the Columbia hospital opened a branch for Negro patients, the white patients and the Negroes being treated in the same institution, though in separate wings.

In the Negro branch of the hospital are many Negro nurses in training.

There are many Negro patients in the state hospital, in its branch at State Park.

By the arrangement made recently, the Negro nurses employed in the State Park branch of the state hospital are given one year's training at the Columbia hospital, the Columbia hospital, in this instance, being "affiliated" with the state hospital.

The two years at the state hospital, topped off with one year at the Columbia hospital, give the nurse training in both the mental and physical aspects of disease, and a nurse so equipped is prepared to render capable service in almost any case.

Dr. C. Fred Williams, superintendent of the state hospital, says this plan has only been in operation a short time.

He added that if the state hospital had the facilities it could give training of a year to nurses who have completed two years' of general hospital work, thus rounding out their training.

Charleston, S. C., Evening Post  
July 24, 1940

## May Abandon Building Plan

Unless approximately \$40,000 can be raised in the next 30 days, plans to construct a negro colored communicable disease pavilion for Roper hospital will be abandoned.

This was decided by the hospital's board of commissioners at a meeting last night after bids for the structure had been opened, and the cost was found to be about \$114,000.

It was with \$75,000 left the hospital by the late Victor Morawetz that the Medical Society of South Carolina, trustees for Roper, hoped to construct the building, and unless the difference can be secured, either through donations or some other source, the project will not be carried out.

The building would be three stories in height, 75 feet long and 45 feet wide, and would be so arranged as to form the wing of a larger structure planned for the future. Plans were drawn by Samuel Hannaford & Sons, hospital architects, of Cincinnati, and Simons and Lapham, Charleston architects, would supervise construction.

Columbia, S. C. Record  
November 6, 1940

## Budget Board Told Hospital 'Unfit For Dog'

Meyer Asks \$8,000 For A  
New One At Negro Boys  
Industrial School

The annual hearings by the state budget commission for the departments, institutions and other agencies of the government were begun on Wednesday, and the representative of one institution put before the commission an appeal for funds for a new hospital.

"What we've got isn't fit for dogs," he said, referring to the present hospital at the institution.

The plea came from Frankie Meyer, superintendent of the John G. Richards Industrial school, for negro boys. (The negro boys reformatory).

Asks \$8000 Plant

Meyer proposed that the budget commission recommend an appropriation of \$8,000 for the construction of a new hospital at the school, located near Columbia.

Otherwise, he asked no changes in the institution's budget. For the current fiscal year, it is operating on a budget of \$40,000, and \$40,083 was proposed by Myer on Wednesday for the next fiscal year, which begins on July 1, 1941.

Comptroller General A. J. Beattie, appearing for his department,

asked an appropriation of \$381,183, which his \$52,893 less than the appropriation for the comptroller general for the current fiscal year. Beattie explained that less would be needed because there would be fewer pensions to pay to Confederate veterans and because there would be no election expenses in the next fiscal year.

Blackwell Proposes \$16,380

An appropriation of \$16,380 was asked for his office by W. P. Blackwell, the secretary of state. His appropriation for the current fiscal year is \$14,925. Attorney General John M. Daniel proposed \$23,748 for his department, as against a current appropriation of \$21,293.

The sum of \$23,085 was asked for the Children's bureau, which is now operating on an allotment of \$21,115. Mrs. C. T. Wooten, the supervisor of the bureau, presented its proposed budget.

The hearings were presided over by Gov. Burnet R. Maybank, chairman of the commission. Present were the other two members, Senator S. M. Ward, of Georgetown, chairman of the senate finance committee, and Rep. Winchester Smith, of Barnwell, chairman of the ways and means committee of the house of representatives.

The next hearings by the commission, which annually makes up a suggested state budget for the general assembly, will be held on November 18 and 19.

Charleston, S. C. News & Courier  
November 19, 1940

## NEGRO HOSPITAL SEEKING \$4,950

Maintenance Campaign Opens  
November 25—Hurricane  
Damage Needs Fixing

A citywide campaign for funds to meet its 1941 operating budget will be initiated by the Hospital and Training School for Nurses November 25, to continue throughout the week. It will include a house to house canvass, and solicitation of contributions through the mail.

This non-profit making institution was founded by the negroes of this city as a community hospital in 1897 and has operated continuously since then. Its entire income, from all sources, is used for operating expenses and improvements. The hospital is one of the beneficiaries of the Duke endowment and until the closing of the Community Chest was one of its agencies.

"The closing of the chest necessitates this method of raising funds and it is earnestly hoped that the full amount required to balance its 1941 budget, \$4,950, will be obtained," an announcement says. "The 1941 budget includes the cost of repairing the damage done by the August hurricane. These repairs must be made and they can only be made if a liberal response is received.

"During 1939 the hospital cared for 462 'in' patients for a total of 4,977 days. Of this number 150 were full paid patients, 114 part paid patients and 198 free patients. The free days of care given that year numbered 3,055. The hospital also operates a free out patient department, under the auspices of the county board of public welfare with the following clinics: general sick clinic, baby clinic, prenatal clinic and syphilitic clinic.

"It is requested of all well wishers of the institution who are not contacted through the mailing list that they send their contributions to the treasurer, the Hospital and Training School for Nurses, 135 Cannon street, Charleston S. C."

## Negro Doctors Win Hospital Fight In Tenn.

By O. B. TAYLOR

KNOXVILLE, Tenn.—(A. N. P.)—A decision handed down Friday in chancery court upheld the Negro physician in their contention that they have equal privilege with those of other racial groups in the tax supported municipal hospital.

The Negro unit to the general hospital became a reality in 1933 when the Rosenwald foundation agreed to invest \$50,000 in the project. An additional \$38,000 was raised by members of both racial groups. In the outset, there was an agreement between the parties concerned that the Negro unit bear the same relationship in every respect to Negro physicians that the hospital bears to white physicians.

This agreement was not kept, hence the suit filed against the city of Knoxville by the East Tennessee Hospital association to compel its fulfillment. Chancellor Mitchell held that Negro physicians are entitled to the privilege of treating their "pay" patients at General hospital. The hospital association, headed by Dr. S. M. Clark, secured the services of the veteran attorney, John A. Huff, dean of the legal profession of the race in this section, who met masterfully; every legal onslaught by the city's attorney, W. B. Lockwood.

The hospital association lost its fight, however, for a nurse training school and internships at General hospital. On this point Judge Mitchell held they were not properly before the court, as nurses and interns were not seeking relief and the matter could not be settled on a "moot" basis.

This case, with far reaching implications, had aroused a keen interest among both racial groups, and many express surprise at its outcome.

# Doctors Win Legal Battle in Knoxville

NOV 15 1940

O. B. TAYLOR for ANP

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Tenn. Medics Win  
City Hospital Rights

NOV 14 1940

Knoxville, Tenn.—A decision handed down Friday in chancery court upheld colored physicians in their contention that they have equal privilege with those of other racial groups in the tax supported municipal hospital.

The colored unit to the General Hospital was established in 1933. At the outset there was an agreement the colored unit bear the same relationship in every respect to colored physicians that the hospital bears to white physicians. This agreement was not kept, hence the suit.

Knoxville Tenn. Journal  
November 9, 1940

## Physicians Are Upheld

### Mitchell Rules Negro Doctors Can Practice At Hospital

Chancellor A. E. Mitchell held yesterday that Negro physicians are entitled to the privilege of treating their "pay" patients at General Hospital.

The ruling was made in a suit of the state, on relation of the East Tennessee Hospital Association, against the City of Knoxville. It had been alleged the city refused to allow Negro physicians to treat private patients. The city had denied any discrimination.

At the same time, Chancellor Mitchell held that the question of Negro internes and nurses was not properly before the court.

The complainant association and several Negro physicians had asked for the right to Negro representation among internes and nurses. But the court said the internes and nurses were not seeking relief, and the matter could not be settled on a "moot" basis.

General Hospital is maintained by the city. Attorney John Huff represented the relators, and Attorney W. B. Lockwood represented the city. Arguments in the case which has been pending more than a year, were completed yesterday.

# Tennessee Physicians Win Fight To Treat Patients In White Hospitals

*Courier*  
*Pittsburgh Pa.*  
Knoxville's General Hospital Case Won as Chancery Court Decides in Favor of East Tennessee Hospital Association.

KNOXVILLE, Tenn., Nov. 27. <sup>NOV 30 1940</sup>—Courageous local citizens have just won a fight which might cause some Northern cities to sit up and take notice in the recent court ruling that no tax-supported hospital in the state of Tennessee may prohibit any regularly licensed physician, regardless of color, from attending his pay patients in such hospitals.

This decision was rendered recently in Chancery Court in connection with the Negro unit to the General hospital. This unit was made possible in 1933 through a

grant of \$50,000 from the Rosenwald fund and gifts from the city and colored and white residents.

At the time the hospital addition was planned, there was an agreement that the Negro unit would offer the same opportunities for practice to race physicians that the white section offered to whites, but this agreement was not kept.

The East Tennessee Hospital Association of which Dr. S. M. Clark is president therefore filed suit to compel fulfillment of the agreement.

Chancellor Mitchell, in his favorable decision, did not restrict the Negro physicians' practice on their patients to the Negro unit, but held that no regularly licensed physician can legally be prohibited from practicing on his pay patients in any municipally owned hospital in Tennessee.

His order, in part, read:

"It is therefore ordered, adjudged and decreed by the court that all licensed physicians and surgeons, regardless of color, have the right and privilege to treat and care for their own private pay patients in the Knoxville General hospital, without supervision, so long as they abide by the reasonable rules and regulations of said hospital and, if necessary, an alternative writ of mandamus will issue against the defendant city, the Director of Public Welfare, and the Superintendent of the Knoxville General hospital to compel recognition of this right."

## Doctors Win Legal Battle Against City of Knoxville

NOV 30 1940

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Chattanooga, Tenn. Daily Times  
December 31, 1940

## PINE BREEZE GETS MORE NEGRO BEDS

20 to Be Opened Tomorrow,  
Bringing Total Beds for  
Colored to 100

Twenty new beds will be opened for Negro tuberculosis patients at Pine Breeze sanatorium Jan. 1, bringing the total number of beds for Negro tuberculosis patients to 100, Dr. Marguerite White, superintendent, announced yesterday.

The opening of the twenty new beds will bring the total number of beds for all patients, white and colored, to 280, Dr. White said.

Dr. White said the opening of the twenty beds was made possible through the generosity of Chattanoogaans in responding to a recent appeal made for this purpose in connection with the Christmas seal sale campaign.

"Two and a half years ago, when the Scholze building at the sanatorium was opened, providing seventy-five beds for Negro tuberculosis patients, it became necessary to close twenty beds in another building," Dr. White said. "This was necessary because of a lack of operating funds."

### \$2,600 Obtained at Party

"Last summer, \$2,600 was raised at a benefit garden party given by Mrs. Scholze for Pine Breeze, and this money, together with that received through our appeal for money to reopen these beds in connection with the Christmas seal campaign, has made it possible for us to reopen the beds for six months. Of course, we hope during those six months to be able to raise the necessary money to continue the use of the beds."

"The twenty beds will be reopened Jan. 1, and present funds will permit their operation for six months. Every effort will be made to obtain the money necessary to operate the beds for the remaining six months."

"Chattanooga, with its great need for proper facilities for the treatment of tuberculosis, needs every available bed in full-time operation, and I am sure the citizens of this city will make it possible to operate all the beds continuously."

"With a total of 280 beds in use when the twenty beds for Negro patients are opened tomorrow, Chattanooga will rank as high as any American city of corresponding size in its facilities for the treatment of tuberculosis. However, with the highest mortality rate from this terrible disease in cities of its size, Chattanooga could well use twice the number of available beds."

Dr. White predicted that the twenty beds to be reopened tomorrow probably would be filled by sunset because of the urgent demand for treatment here.

Chattanooga, Tenn. Daily Times  
March 8, 1940

## DOCTORS SEEK COLORED WARD FOR ERLANGER

### Treatment Room Promised Negro Physicians Tell Bass and Cummings

A new complaint that nothing has been done to carry out a promise to build a colored ward at Erlanger hospital irked a group of colored doctors of a separate ward at Erlanger hospital which the colored doctors can treat their patients, has been lodged with Mayor Ed Bass and Judge Will Cummings, the mayor said yesterday.

Mayor Bass said a committee of colored doctors composed of Dr. P. A. Stephens, president of the Mountain City Medical society, and Dr. N. B. Callier, called at his office Wednesday to inquire why the promise had not been kept. Later, he said, they called upon Judge Cummings.

"A ward for the colored doctors was promised before the hospital bonds were authorized," Mayor Bass said. "We were given an understanding that it would be provided. I had the matter up with the hospital board of trustees and the hospital building committee, and I thought the ward would be furnished. I understand that it hasn't yet been provided. We will take it up with the hospital board."

The mayor said there is no reason why the colored doctors should not have a ward where they can treat their own patients at Erlanger. As it is now, he said, the colored doctor has to leave his patient at the Erlanger hospital door.

#### Cummings Favors Ward

Judge Cummings also took the position that the ward should be equipped and opened. He said that the board had advised him that it had no funds with which to complete this project but the mayor pointed out that it was agreed before the bonds were issued that such a ward would be provided.

Dr. Stephens last night said the colored doctors had expected the ward to be opened by this time, saying the new Erlanger building opened nearly six months ago. The physician said he was informed by hospital authorities that the operation of such a ward

would cost between \$7,000 and \$8,000 a year.

The colored medical society will meet tonight. Dr. Stephens said he expects the hospital ward matter to be discussed.

The colored doctors have been pleading for a ward at Erlanger hospital for the past eight or ten years and have appeared at various meetings of the county court and city commission. Both the mayor and county judge have pledged their support to the establishment of the ward, but the matter of equipping it has been left in the hands of the hospital board.

#### Chairman Sought More Money

Last fall when the county's 1939-40 budget was under consideration, Sam McAllester, chairman of the hospital board, appealed to the county court for an increase in the appropriation for Erlanger. In addition to asking for an increase in the annual operating budget, Chairman McAllester also appealed for enough money to retire a floating debt of several years standing, which, the board contended, has resulted from inadequate appropriation from the city and county for charity work from year to year. Chairman McAllester said recently that inadequate appropriations from public sources has been a drawback to the operation of the enlarged hospital this year.

Dr. Stephens contended that colored doctors should have the benefits of the clinical experience which they would get if they had a ward of their own where they could follow their patients and treat them in a public hospital.

"It is for the benefit of public health in general that we desire a ward at Erlanger," Dr. Stephens said.

Knoxville, Tenn. Journal  
April 15, 1940

## To Press For Early Date On Hospital Suit

### Deposition Completed, Says Attorney

East Tennessee Hospital Association has completed its deposition in the suit of the "East Tennessee Hospital Association vs. The City

of Knoxville," the executive committee of the association has been informed by John A. Huff, attorney.

This suit is pending in Chancery Court, and was set for trial March 18, but due to the length of time required to take deposition, additional time was requested, and it was passed indefinitely. Request now will be made for another date. The suit grew out of a complaint made by the hospital association, which sponsored the Negro Unit of the Knoxville General Hospital, charging discrimination. Dr. S. M. Clark, president of the association, said efforts are being made to improve the health and welfare condition of the colored people of Knoxville. To this end, a special public welfare program will be presented at Clinton Chapel Church, April 28 at 3:30 p. m.

Memphis, Tenn. Commercial Appeal  
April 25, 1940

## MAYOR WILL ON BRIDGE

### Chandler To For Washington, N. Y.

Mayor Chandler will leave for Washington and New York Sunday night in the interest of the proposed new Memphis bridge and the hospital for crippled negroes to be built in connection with John Gaston Hospital.

Frank Ahlgren, editor of The Commercial Appeal, also will be in Washington this week end and will confer with officials on plans for the bridge.

Mr. Ahlgren is a member of the Memphis and Arkansas Bridge Committee, established by Congress last year.

#### Davis Has Resigned

E. H. Crump, commission chairman, said yesterday that Representative Cliff Davis has submitted his resignation from the Bridge Commission and that Mayor Chandler is being named to succeed him.

Other Bridge Commission members are: Arkansas, J. O. E. Beck

Nashville, Tenn. Banner  
July 16, 1940

## Negroes Protest Conditions at General Hospital

The Nashville Branch of the National Association for the Advancement of Colored People has written an open letter to Mayor Thomas L. Cummings and City Council President U. M. Williams criticizing conditions at the Nashville General Hospital in regard to the wing for Negro patients.

The letter, signed by S. L. McDowell, Negro minister, president of the Nashville organization, states that some of the "facts" developed by "our investigation" are:

Lack of modern beds in Negro wards.

Negro patients not allowed to have their Negro doctors in wards.

No Negro nurses.

Negro orderlies and maids underpaid.

The association asked that an investigation of their claims be made by proper authorities. President Williams said that he had not received the communication and would not comment until he had had an opportunity to study the association's request.

was built, will be principal speaker. Dr. J. H. Presnell is in charge of the program. Dr. Presnell donated the picture to the Negro unit.

## NEGRO HOSPITALS SOUGHT Commercial Appeal Units At Six Cities Asked Under Federal Aid Program

The Federal Government was asked at Washington yesterday by the National Negro Hospital Foundation to build 100-bed hospitals for negroes at Memphis and five other cities under the projected \$60,000,000 Federal hospital aid program.

The trustees said the hospitals could be used for the training of negro physicians and nurses. They also recommended location at Louisville, Atlanta, Birmingham, Charleston, S. C., and Dallas.

Sr., J. C. Johnson, J. Lan Williams, W. W. Campbell, C. R. Walton, A. C. Oliver, J. L. Shaver and James Crane; Memphis, E. W. Hale, W. H. Jasspon, W. B. Fowler, Will Gerber and Frank Gailor.

While Mayor Chandler's trip is principally in the interest of the bridge, he has an appointment in New York with Basil O'Connor, president of the National Foundation for Infantile Paralysis.

#### Contribution Sought

Mr. O'Connor was formerly a law partner of President Roosevelt and the foundation is interested in the famous Warm Springs, Ga., infantile paralysis institution. A contribution by the foundation for construction of the Memphis hospital is under discussion.

The Mayor had expected to be accompanied by Mr. Hale, chairman of the Shelby County Commission, on a tour of homes for delinquent children. Building of such a home here is being considered. Mr. Hale is ill with influenza, however.

Mayor Chandler has written the Osborne Association, Inc., for recommendations as to model delinquent children's homes, which they will visit later.

Memphis will be represented at the annual United States Chamber of Commerce meeting in Washington Monday through Thursday by five delegates of the local Chamber of Commerce.

Those planning to make the trip are: Phil Pidgeon, Memphis C. of C. president; Bayard Boyle, W. H. Jasspon, Frank R. Ahlgren, Dr. L. M. Graves and Cliff Penland, executive secretary of the chamber. Several others may attend.

Dr. Graves, city health officer, will go to receive the annual health award for Memphis for cities in the 250,000 to 500,000 population bracket, presented annually by the United States Chamber of Commerce and the Public Health Service.

Knoxville, Tenn. News Sentinel  
August 2, 1940

## Rosenwald's Portrait Donated to Hospital Unit

A PORTRAIT of Julius Rosenwald, who gave \$75,000 to the Negro unit of Knoxville General Hospital, is to be unveiled at appreciation day services at the hospital at 3 p. m. Aug. 8.

George R. Dempster, city manager at the time the unit

# STRONG PROTEST ON HOSPITAL ILLS FILED WITH MAYOR

## Deplorable Condi- tions Found; Charge 'Whitewash' By City Commissioners

Mayor Thomas L. Cummings and U. M. Williams, President of the City Council, received a strong protest on the conditions said to be prevailing at the General Hospital from colored citizens of Nashville through the National Association for the Advancement of Colored People this week. Deplorable conditions are alleged to exist in the "colored" ward and the charge is made that the City Board of Hospital Commissioners have attempted to "whitewash" those guilty of the conditions. The letter of protest is as follows:

### AN OPEN LETTER TO THE MAYOR AND THE CITY COUNCIL

July 15, 1940

Honorable Thomas L. Cummings,  
Mayor,  
Mr. U. M. Williams,  
President, City Council  
City Hall,  
Nashville, Tennessee.  
Dear Sirs:

Citizens of Nashville, including colored citizens, are very much interested in the state of affairs at our General Hospital. The Morrissey committee of the City Council and City Auditor Moore have brought to light only a fraction of the conditions existing there, mainly about bookkeeping and finance. The City Board of Hospital Commissioners has attempted to apply a coat of whitewash to their findings. But bookkeeping is not the only trouble at the General Hospital. Conditions affecting patients and employees are deplorable.

Here are some of the facts we found in our own investigation of the General Hospital:

1. There are no modern beds in the colored ward.
2. There are no drinking fountains in operation in the colored ward.
3. Colored patients are not permitted to have their own colored doctors come into the hospital.
4. There are no colored nurses.
5. Orderlies (colored) are paid what amounts to 11c an hour; that

is, they work 78 hours a week and are paid \$35.00 per month. No vacations.

6. More than three-quarters of the colored maids are paid what amounts to 7 1-2c an hour; that is, they work 65 hours a week and are paid \$20.00 per month. The remaining maids are paid less than \$30.00 per month. No vacations.

7. The service to patients in all wards suffers for the lack of sufficient help.

Can these conditions be regarded as up to a reasonable modern standard? We do not think so. We are not so much interested in whether the administrator's name is Mr. Jones or Mr. Smith or Mr. Wood, or in how much is spent for gingerale at the hospital, but we do maintain that our city hospital should come up to modern hospital standards in both the colored and white wings of its service. How can employees be expected to render adequate service to the public at 7 to 11 cents per hour?

We ask that the city authorities give full consideration to this matter, to the end of improving conditions at the General Hospital.

Sincerely yours,

National Association for the  
Advancement of Colored People.

Signed:

S. L. McDowell, President  
407 Sylvan Street.

# WANT ADDITIONAL PRIVILEGES FOR COLORED DOCTORS

SEP 14 1940

KNOXVILLE, Tenn., Sept. 12—(By O. B. Taylor for ANP)—A suit of the East Tennessee Hospital Association to compel the city of Knoxville to grant additional privileges to Negro doctors at the general hospital, is scheduled for hearing in chancery court, Sept. 12, at 9 a. m. The suit was filed August 16, 1938, by members of the East Tennessee Hospital Association who declared that colored physicians were not permitted to attend their patients at the hospital, there were no interns, or nurse training school, and that the set-up was not satisfactory to the Julius Rosenwald foundation which helped build the Negro unit to the General Hospital. Conditions affecting patients and employees are deplorable.

The hospital association further protested that Negro physicians

The suit was once set for February but was deferred. The hearing on Sept. 12 will be the first on the merits of the case. The suit is being keenly watched by members of both racial groups here, because of its far-reaching implications.

Knoxville, Tenn., Journal  
August 29, 1940

## Suit Of Negro Doctors To Be Heard Sept. 12

A suit of East Tennessee Hospital Association, Negro organization to compel the city of Knoxville to grant additional privileges to Negro doctors at General Hospital, is scheduled for hearing in Chancery Court Sept. 12 at 9 a. m.

The suit was filed Aug. 16, 1938 by a group of Negro physicians here who declared they were not permitted to attend their patients at the hospital, there were no Negro internes, and the set-up was not satisfactory to the Julius Rosenwald Foundation which helped build the Negro unit at the hospital. The Negroes protested not being given representation on the hospital staff.

The city filed a demurrer which was overruled. Then the city made a detailed answer, denying many of the complaints of the Negro association.

The suit once was set for trial last February but was deferred. The hearing on Sept. 12 will be the first on the merits of the case.

Knoxville, Tenn. News Sentinel  
September 13, 1940

## NEGRO HOSPITAL CASE OFF UNTIL SEPT. 20

Chancery Court hearing of the suit brought by the East Tennessee Hospital Association against the city, for Negro doctors and nurses at General Hospital, has been recessed until Sept. 20.

Chancellor Mitchell heard the bill and answer and several depositions Thursday.

The association contends the city does not grant Negro physicians the rights to which they are entitled under the agreement by which the Negro unit of the hospital was built in 1933. The city insists that Negro and white physicians are treated equally.

Knoxville, Tenn. News Sentinel  
September 13, 1940

## NEGRO HOSPITAL MANDAMUS SUIT UP

Doctors Claim Discrimination  
at General.

Testimony in the suit of the East Tennessee Hospital Association against the city of Knoxville seeking greater privileges for Negro doctors and nurses at General Hospital was being heard by Chancellor A. E. Mitchell today.

The association has charged that Negro physicians and nurses are discriminated against in the operation of the Negro unit of Knoxville General Hospital. It seeks a writ of mandamus.

The city filed a demurrer to the suit which was overruled by Chancellor Mitchell several weeks ago.

In its defense today, the city insisted that Negro doctors and nurses now have full privileges as far as pay patients are concerned, but that all charity patients are cared for by regular appointed physicians named by the hospital staff. The same restrictions apply to white physicians, the city declared.

Defendants with the city are City Manager W. W. Mynatt, Welfare Director John T. O'Connor and Hospital Superintendent T. H. Haynes.

# Texan's Dream Comes True as Hospital Opens

SEP 21 1940

By SAM McKIBBEN

AUSTIN, Texas—After sixteen months of persevering labor and unselfish sacrifice the Rev. Francis R. Weber saw the materialization of his dream, that of a hospital for Austin Negroes, and the dawn of a new era in local medical history, Sunday, with the formal opening of the Holy Cross Hospital for Negroes. This completely equipped institution was erected at a cost of \$20,000, all of which was personally solicited by Father Weber.

Four Wards

The hospital, a beautiful two story structure, has four units, one each for men, women, children and infants. In case of emergency, forty adults, sixteen children and twelve infants can be accommodated without taxing the unit to capacity.

Surgical Unit

In addition to a large, light and airy emergency ward, is a completely equipped operating room in which Race surgeons may operate. Because there were no operating rooms available to them Negro surgeons have, in many instances, been reluctant to practicing in the capital city. It is the hope of Father Weber that Pace physicians and surgeons will avail themselves of the opportunity to hospitalize their patients when the nature of illness requires it.

Born of Necessity

"The Holy Cross Hospital for Negroes was born of necessity," states its energetic young founder. "My heart was touched time and again when a Negro, badly in need of hospitalization and constant care, was turned away from the local hospitals because he was unable to pay a high fee for hospitalization and attention. Whereupon, we set about correcting the evil. We decided to build a hospital and went about soliciting funds with which to buy the property upon which the building would be erected, and finally raised the

or a statement of credits from their former schools.

Children starting schools for the first time will report Tuesday afternoon. They must be six years old when school opens or reach that age before October 1 in order to be eligible for entrance at the fall term.

High school students, both former and new, report Tuesday morning.

Two white and two Negro schools, the last to be completed in the city-PWA \$3,300,000 program, will be occupied for the first time this fall.

The white schools are North Nashville Junior and Senior High School, Clay and Owen Avenues, which will enroll about 900 students and have 32 teachers; and Howard School, Second Avenue, South, and Lindsley, with 800 elementary and 600 junior and senior high school pupils, 17 elementary, and 21 junior and senior high school teachers.

The Negro schools are Cameron, First Avenue, South, and Lafayette, enrollment of 600 elementary and 600 junior high school students, 12 elementary and 20 junior high school teachers; and Ford Green, Twenty-sixth Avenue, North, and Albion, with 1,000 elementary pupils and 21 teachers.

## SCHOOLS ABANDONED

Opening of the new schools and rezoning allows the city system down payment of \$1,000. When the initial payment was made I signed a promissory note for \$1,700 payable in 90 days. My implicit faith in Providence was rewarded and after a struggle, the note was met. The hospital site was ours!"

## Draws Plans

Father Weber, drew up his plans, called in workers, and went about laying the foundation. In the meantime he continued his solicitations. The money came slowly, but steadily, and the building went up.

At last it was completed. The furnishing problem was faced with unusual success. Interested friends, Protestant as well as Catholic rallied and Holy Cross Hospital became a reality.

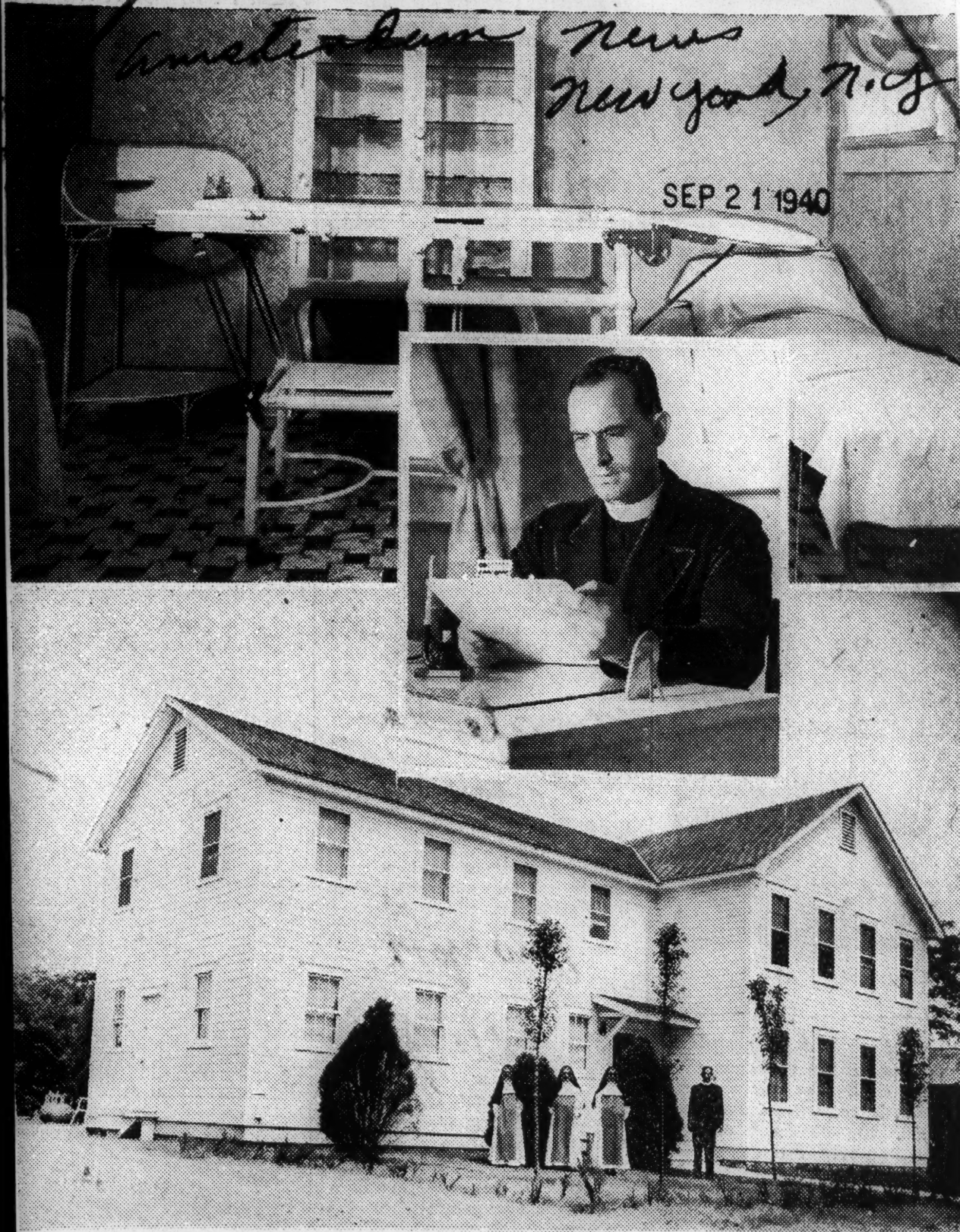
How Accomplished

In summing up this magnificent achievement, Father Weber, stated that this fully equipped hospital is the result of many hundreds of small donations! No large amounts poured into it from the rich although its humanitarian objective has an appeal few charitable works have.

## Manner of Operation

The hospital is pledged to give the maximum of service at rates acceptable to the lowest salaried workers. It has no intention of giving free hospitalization as there is no public support at this time to support it; nor does it have an endowment. But, any person able to pay something, but unable to meet the hospitalization rates elsewhere, will find the Holy Cross Hospital a haven of refuge. The hospital has no intention of "making money"—but since it, like all other institutions will have expenses of maintenance. Paupers are cared for by the city and county taxes when they need urgent operations or hospitalization (if and when beds are available). The masses, who ordinarily would have to care for themselves, will find Holy Cross Hospital for Negroes a God-Send.

# DREAMS SOMETIMES COME TRUE . . . EXHIBIT ONE



Shown below is the beautiful new Holy Cross Hospital for Negroes in Austin, Texas, erected at a cost of \$20,000, the entire sum of which was solicited by the Rev. Francis R. Weber pictured in the inset. This is the only hospital in the capital city of the nation's largest state that is exclusively for Negroes. The photo above shows the hospital's operating room, the only one available to colored surgeons in Austin. This modern operating room, fully equipped is open to all race doctors and surgeons regardless of religion. It represents a new era of medical and surgical history of this city.

## To House NMA Surgical Clinics



*6/19/42*  
*Washington D.C.*  
This is the ~~Houston~~ *Hillman* Negro Hospital which will house surgical clinics of the National Medical Association, August 12-16. The hospital building was the gift of the late J. C. Cullman in memory of their son who made the supreme sacrifice on the battlefields of France during the World's War. It is built on land given by the city of Houston, and receives part of its financial support from the Houston Community Chest.

## Race Medics Serve In New Texas Hospital



*Reynolds 7-23-40 Atlanta Ga.*

The new 11 story structure which makes available 500 beds for indigent sick of the City of Houston and Harris County was built at a cost of over \$2,000,000. Six Negro physicians serve in the out-patient clinics. Eight others serve in the Anti-Tuberculosis League clinic which is housed

in this building.

Many interesting clinics and ward walks are planned at this hospital for the entertainment of the NATIONAL MEDICAL ASSOCIATION August 12-16, 1940.

# Norfolk Community Hospital

## Symbol of Real Cooperation

### The Norfolk Community Hospital

*Journal Guide*  
*Norfolk, Va.*  
A monument to the foresight, courage and relentless efforts of the Negro doctors of Norfolk is its new Community Hospital, a modern, 65 bed unit, built at a cost of \$100,000 and equipped to serve the varying needs of the city's colored population.

This attractive building, located on a corner of the Municipal Golf Course and Park, facing Corpnew Avenue in what is the Boulevard Terrace residential development, is only a little over a year old and is a far cry from the humble beginning this much needed institution experienced in the days gone by.

The Community Hospital has an interesting history, one built out of the sacrifices of men with vision. These men

were benefactors who saw a need and set about to serve that need at great personal loss of time, energy, and even money.

Best of these benefactors was the late Dr. Wilbur A. Drake, who in April, 1915 personally donated, along with Mrs. Drake, land on which the first Tidewater Hospital was erected in the Lambert's Point section of the city.

#### DR. WEBB CHIEF

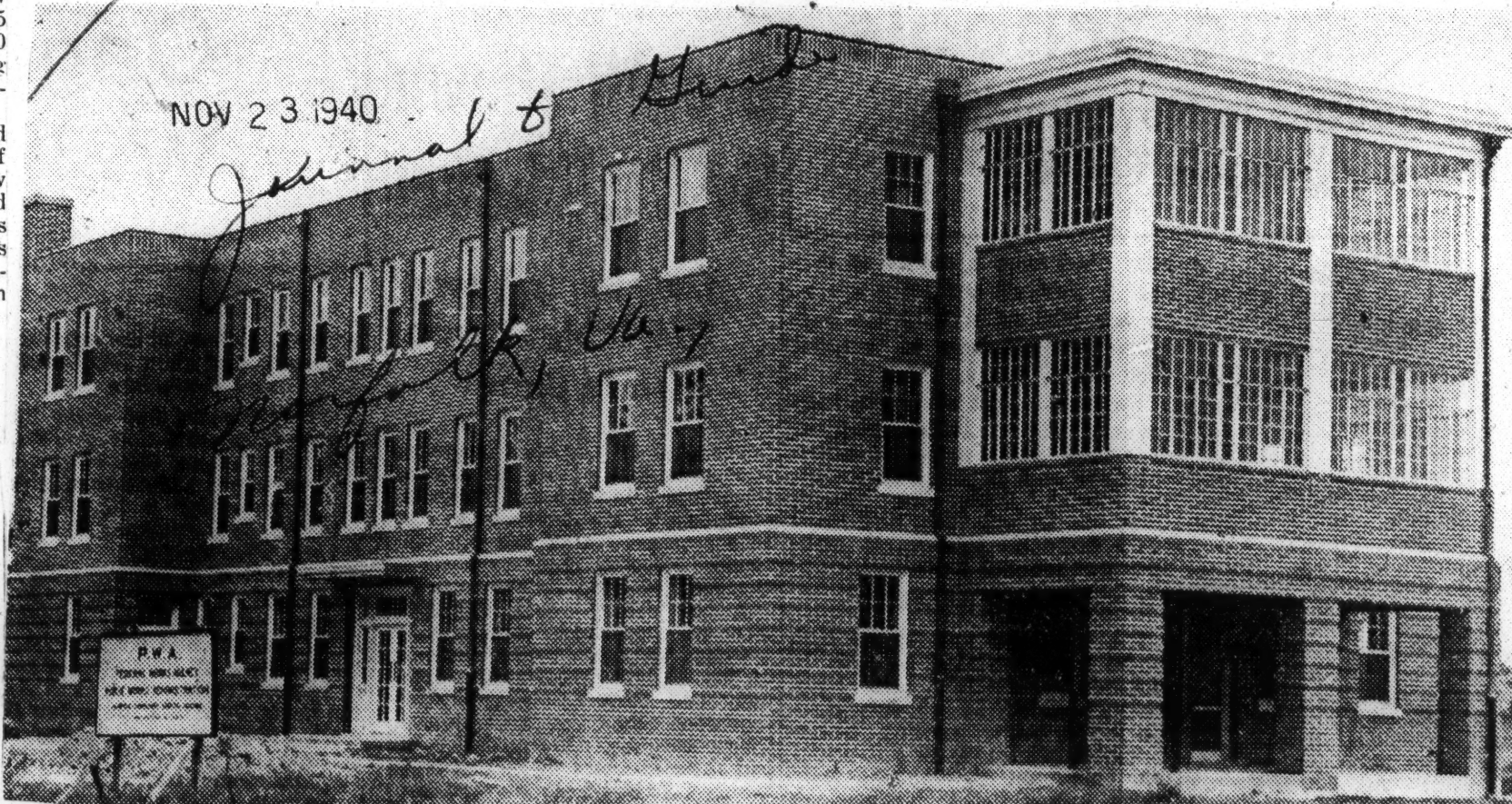
This was a 12-bed hospital and Dr. Drake's assistant was Dr. J. Q. A. Webb who carried on the work after Dr. Drake's death and who is at present chief-of-staff.

In October, 1932, this hospital was merged with the Community Maternity Ward, which was located adjacent to the First Calvary Baptist Church on the Henry Street side.

The vacated Henry A. Wise hospital building, a unit previously used by the city as a contagious disease ward and located on Rugby Street near Church Street, was acquired from the city on a \$1.00 a year lease and the merged hospitals moved into this structure in 1932 with only four patients.

#### OFFICERS

W. M. Rich, then president of Metropolitan Bank and Trust Company, became president of the newly organized Norfolk Community. The late J. C. Brooks was treasurer;



er; P. B. Young, chairman of the board of trustees; and W. T. Mason, secretary of the board and business manager. Mr. Mason has held the latter position until the present time.

At the end of two years, Mr. Rich resigned and Mr. Young became president in 1934. The Rev. B. W. Harris was elected treasurer to succeed Mr. Brooks on the latter's death. In 1936, on resignation of Mr. Young, Rev. Mr. Harris was named president.

T. W. Young and Miss Beuna V. Kelley were elected vice presidents; S. H. Bell, treasurer; and Mr. Mason, administrator. This roster of officers serves the hospital at present.

By 1939, the hospital had grown greatly. From its original patient load of four, it had increased until normally the

hospital was greatly overcrowded with an average of about forty patients. Designed to accommodate only 25, the facilities were so consistently over-taxed that new space was imperative.

It had started with only four nurses and a nursing superintendent and by this time the staff had increased to 12 nurses and several other staff members.

The splendid administration of the hospital recommended the institution to the city authorities, who put up \$55,000 of the \$100,000 needed to erect the new hospital plant. The city secured a government grant to cover the rest of the cost of the hospital and leased the property for the \$1.00 a year figure which had prevailed when the original Rugby Street property had been leased.

The Community Hospital Association is required to pay the insurance on the property, pay for the general upkeep, pay the operating expenses, and purchase equipment.

#### CLUBS GENEROUS

As was previously the case, the city and the Community Fund both contribute to the operating costs of the property. The bulk of the vast

cost of operating the hospital must fall back, however, on the patients and on the monies raised from other sources by the energetic officers of the Hospital Association.

Many Norfolk churches, clubs, and individuals generously aided in the purchase of much needed equipment and furnishings for the hospital through the years and because of the unfailing public support the institution has progressed despite almost impossible barriers.

The new facility has space for

nearly every type of hospital work, is well equipped, and is prepared to serve Norfolk in a thoroughly modern way.

The hospital records for the 12 months reveal efficient operation and capable supervision. Of the 907 patients admitted during that period, 422 had operations. In that period, there were only 56 institutional deaths.

There are 12 nurses and the present superintendent of nurses is Miss Veatrice Durham, who succeeded Miss Thelma Gibson, who resigned to accept a new job. There is a technician, a dietitian, a pharmacist, two orderlies, and two clerks.

#### STAFF MEMBERS

Medical staff members are local physicians. Those holding staff positions

sitions are: Dr. J. Q. A. Webb, chief of staff; Dr. G. Hamilton Francis, assistant chief of staff and head of the medical division; Dr. C. R. S. Collins, obstetrics; Dr. F. W. James, ear, eye, nose and throat; Dr. W. P. Collette, house physician in charge of out-patient department; Dr. E. R. Archer, resident physician; Dr. K. K. Wallace, X-ray; Dr. Mary Roach, pathologist; and Miss Mary Lou Taylor, technician.

#### ACCREDITED

The medical department is well organized. The hospital was conditionally approved by the American College of Surgeons in 1938 and fully approved as an accredited hospital, one of 12 colored hospitals with that recognition in the United States, in 1940.

Nearly one half of its patients are charity patients and get treatment free which means that only about 50 percent even pay part of their bill.

The hospital has permitted two senior medical students from Middlesex University to do required practical work here. The first was Dr. William Scales, and the second, now at the hospital, is David Cornick, Berkley resident. During the summer, J. J. Quarles, Jr., of Berkley, Meharry Medical senior, did extensive work at the local institution.

#### WHITE CONSULTANTS

Many white physicians, leaders in their special fields, serve on the staff as consultants.

The untiring efforts of some of the local physicians, the officers of the association, and the general public, both white and colored, have been responsible for the unusual degree of success attained by the hospital.

The administrative officers are justly proud of the fact that the Norfolk Community Hospital is the only such institution in the United States, operated, managed, and controlled exclusively by Negroes. Its splendid record of growth and progress is a tribute to the genius of those who have put it over.

Richmond, Va. News Leader  
December 17, 1940

## Ask Building For Negroes At Pine Camp

### Full-Time Venereal Control Officer Urged

The erection of a new building for Negro patients at Pine Camp, and the appointment of a full-time technician is recommended by the Richmond Community Council's committee on tuberculosis control.

There is a lack of sufficient beds for Negro patients, of facilities for segregating Negro children and adults, and also of X-ray facilities for Negroes at Pine Camp, according to the committee which based its findings on a study of the survey made here last year by Dr. Don W. Gudakunst, of the United States Public Health Service.

The committee also recognized the fact that a number of improvements can be made in the general cleanliness of the buildings and culinary utensils at Pine Camp and in the nursing service. Members of the committee are: Dr. W. L. Nalls, Miss Nora Spencer Hamner, Dr. T. D. Davis, Dr. E. C. Harper, Dr. Kinloch Nelson, Dr. P. E. Schools, ex-officio, and Dr. W. B. Foster, ex-officio.

### Full-Time Venereal Control Officer Urged

Recommendations that a full-time venereal disease control officer, satisfactory to the State Health Department, be appointed for the City of Richmond was made by the venereal disease control committee of the Community Council committee at the meeting yesterday afternoon.

The venereal disease committee, headed by Dr. Kinloch Nelson, urged better understanding between the Medical College of Virginia venereal disease clinic and the City Welfare Department, and said that conflicting points of view exists in regard to treating the city patients on the one hand and the question of instructing students at the Medical College on the other. It urged more complete confidence and co-operation between the college and the Welfare Department.

The city is in danger of losing some of the Federal venereal disease control work if the program here is curtailed, said the report, which points out that the city now has a part-time control officer working about four hours a day.

### Recommends Postgraduate Clinics in Syphilis

The committee recommended postgraduate clinics in syphilis for the benefit of local practitioners, probably to be arranged by the Medical College and the Academy of Medicine; a more complete record system in the office of the control officer; that more space be provided for the syphilis clinic at the Medical College; that a better follow-up system at the clinic be undertaken, with the possibility of having this work completely under the City Health Bureau; that the bookkeeping of the syphilis clinic be so rearranged as to permit a clear understanding as to its income and outgo, that an effort be made to arrange a plan for returning to private practitioners those syphilitics who can pay as much as \$1 per treatment and that a trained medical social worker be attached to the admission department at the clinic.

Attached to the report was a statement that it had been reviewed with Jesse M. Johnson, director of the Department of Public Welfare; Dr. F. J. Wampler, director of the Out-Patient Department of the Medical College, and Dr. Clyde Ross, all of whom "are in agreement with it." Members of the committee were Drs. Nelson, A. I. Dodson, T. W. Murrell, R. H. Fowlkes and E. M. Holmes.

Portsmouth Va. Star  
December 16, 1940

## COLORED HOSPITAL FOR CITY IS OBJECTIVE OF GROUP

By LEE F. RODGERS

Earlier this year a group of well known colored citizens met to discuss the possibilities of establishing a colored hospital in Portsmouth. A Fact-Finding Committee was named and the movement got its start. The group that met formed itself into a temporary hospital organization or association, with Rev. H. G. Wilson as chairman and Mrs. L. V. Jordan as secretary.

The association met some months later, and strengthened the temporary organization by the addition of other citizens and the appointment of other committees. The colored physicians of the city, many of the clergy, as well as many others, are already members of the group, and by the time the association meets again, on the second Tuesday in January, in Norcom High School, there will be many more additions to the group.

Committees that are active now in the interest of the movement are the Ways and Means Committee, Fact Finding Committee,

and Contact Committee. The Contact Committee, comprising Lee F. Rodgers, Dr. John A. Jackson, Dr. W. B. Anderson, Rev. C. J. Washington, Dr. A. R. Pugh, Dr. W. E. Reid, Prof. W. E. Riddick, Mrs. L. V. Jordan, Mrs. Mary J. Davis, and Mrs. Alberta Ricks, is charged with creating sentiment in a colored hospital here.

One of the acts of the committee is getting in touch with local pastors and requesting them to speak of the colored hospital project to their congregations. Mimeographed letters were sent out to the ministers.

Another committee, composed of the following physicians: Drs. E. H. Adams, J. T. Canaday, J. W. Barnes, W. E. Reid, and John A. Jackson, has been charged with contacting white physicians relative to the colored hospital movement. The Ways and Means Committee is composed of Dr. J. A. Jackson, Rev. Nicholas J. Habets and John Jordan, newspaper reporter. Additional members have been named to the Fact Finding Committee.

# Need for Free Beds at State Sanatoria Acute To Purchase 'Iron Lung' For the Dixie Hospital

RICHMOND, Va.—Although the completion of new buildings at the state's three sanatoria during the past year has materially increased the patient capacity at these institutions, the need for more free beds remains pressing. J. Vaughan Gary, president of the Virginia Tuberculosis Association, said this week.

With that in mind, Mr. Gary declared that his organization and its affiliated associations and committees throughout the Old Dominion were standing squarely behind Governor Price's request to the General Assembly for additional funds to continue the treatment of Virginia's increasing patient population and to provide for additional free beds.

To meet the growing demands for free beds, and to provide for the increased patient population, the Governor has asked for a total appropriation of \$936,215 for the 1940-1942 biennium, an increase of \$196,500 over the past two years period.

Indicating the need for more free beds for indigent patients, Mr. Gary pointed out that on January 13, there was a waiting list of 119 for admission to Catawba, and 37 seeking entrance to Blue Ridge, a total of 158 white victims in need of hospitalization for which they are unable to pay. The need of colored patients is even more acute. Mr. Gary said, stating that last month there was a waiting list of 216 for free treatment at Piedmont Saratorium.

HAMPTON, Va.—Another dream of the medical and administrative staff of Dixie Hospital, born several years ago, is about to come true. Mrs. Leon Hard, chairman of the President's Birthday Ball Committee for Elizabeth City County, announced Saturday that the group has decided to purchase an "iron lung" to be placed at the hospital for community use.

All funds derived from the birthday ball to be held at the Hampton armory, January 30, will be set aside in a special treasury, to be increased to an amount sufficient to purchase a Drinker-Collins respirator, through public subscription.

It is planned to have both Elizabeth City County, and the Newport News-Warwick County area pool their resources so that the iron lung might serve the associated communities.

In special proclamations designating Saturday, January 27, as "Tag Day" in the campaign to fight infantile paralysis, Mayors J. V. Bickford of Hampton and William J. Kearney of Phoebus, called upon all citizens of their respective communities to give unstinted support to the fund raising committees.

## Why Socialized Medicine Is A Current Trend

A prominent Norfolkian, Mrs. Harriet Heath Barron, has revealed in a published letter the plight of the poor who are in need of hospitalization. Although it was made clear in advance, by the mother of a girl who had to be operated upon, that payment would have to be in installments, when the bill was not discharged in full upon demand the patient was forcibly detained in the hospital "until the hospital was reminded of the risk they ran... of becoming involved in a lawsuit."

As Mrs. Barron pointed out, hospitals, too, have their collection problems and must have an income for maintenance, but they have ample means of getting an obligation liquidated and absolutely no right in morals or law to use a patient's person as hostage for a debt.

The patient's mother was "insulted" and subjected to "great agony of mind" through her ignorance of her rights, and Mrs. Barron pertinently offers the reminder that a human being's lack of means is no license to an institution's staff to humiliate a patient. Both private and public hospitals too often act as if their ministrations are bounties to be bestowed instead of a privileged opportunity for humane service.

The medical profession generally is vigorously opposed to any form of socialized medicine or subsidized hospitalization, but the sufferings, the humiliations, the pains and miseries of humankind must be eased. Such experiences as the daughter of Mrs. Barron's cook underwent are one of the factors making for the establishment of some sound guaranty of hospitalization for those most in need of it and least able to finance it.

## Sees Need of More Beds For Negro T. B. Sufferers

RICHMOND, Va.—As one means for the further control of tuberculosis, the tuberculosis committee of the Medical Society of Virginia has recommended that all public school teachers have chest X-rays made before being employed to teach in the public schools of the state.

In addition, the tuberculosis committee also recommends that an effort be made to improve instruction of nurses regarding tuberculosis in the state's training schools, and also advocates post-graduate instruction at sanatoria for physicians.

The committee found that there is a definite need for more beds for Negro patients, pointing out that a recent addition to Piedmont Sanatorium is only partially taking care of the present waiting list.

Reviewing recent developments of the program to wipe out the white plague, the Medical Society's committee laid special emphasis on the importance of collapse therapy and said: "Collapse therapy, in and out of the sanatoria, has done much to convert positive, into negative sputums and has been of more value from a public health standpoint than any other procedure in the control of tuberculosis in Virginia."

Concerning the tuberculosis program in Virginia, conducted by the Virginia Tuberculosis Association and other official and volunteer agencies, the report declared there was "A marked expansion since the committee's last report," submitted one year ago.

### A SPLENDID CHOICE

Danville's Negro citizens must have been pleased yesterday morning upon reading in The Register that the board of directors of the new hospital in Almagro had chosen to name the municipal institution for the late Dr. A. L. Winslow.

The word "memorial" does not have to be used to make the hospital a memorial to the able Negro physician who practiced among his people here for forty years. The good works of Dr. Winslow during his lifetime had built their own memorial in the affections of his people. This new recognition is an added and tangible tribute. Coming as it does from a board consisting of six whites to three colored members, it means simply that Danville citizenry was aware and appreciative of good citizenship and high community service on the part of a colored man who went about doing good for so many years.

Winslow Hospital is well named.

Norfolk, Va. Pilot  
October 23, 1940

### Story of a Hospital

Unconditional approval of the Norfolk Community Hospital by the American College of Surgeons is a goal toward which this all-Negro institution began climbing 25 years ago, receiving many a timely lift from the municipality on the way up. The sequence of events in the achievement tells a story.

In 1915 there was the tiny Drake hospital at 1452 Forty-second street. In 1932, the vacated Wise contagious diseases hospital building on Rugby street was obtained and the present name assumed. In 1938, the Council turned over to the directors of the hospital the operation of City Beach near Little Creek. Modest profits from this operation have been turned into the hospital's deficit-ridden treasury. That was the year in which the College of Surgeons gave the hospital its provisional approval. In 1939, with the hospital housed in a new \$100,000 fire-proof building in Memorial Park, the last retarding factor was removed, and the approval became unconditional.

Today, in 1940, Norfolk Community Hospital has a doubly merited claim on public support. It is certified as doing a good job. The story? It is that patience, hard work and cooperation overcome many obstacles.

# Winslow Hospital Is Dedicated In Danville

DEC 7 1940

DANVILLE, Va. — Headed by Mayor W. E. Gardner, more than 500 Danville citizens of both races last week participated in exercises dedicating the new Winslow Hospital here, and paid tribute to the memory of the late Dr. Albert L. Winslow in whose honor the new structure is named.

The exercises were held in the sun parlor of the new hospital building which is located at the corner of South Main and West Paxton Streets.

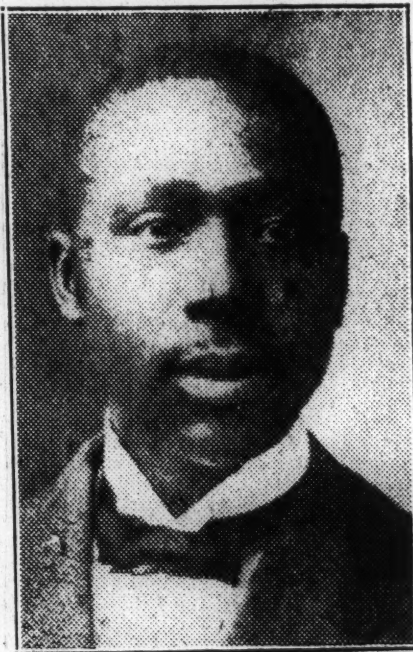
### DR. HARRIS PRESIDES

Music for the occasion was furnished by the John M. Langston High School Glee Club. The scriptures were read by the Rev. C. H. Harris, who served as master of ceremonies. A tour of inspection of the new building was made by all present at the completion of the exercises.

Mayor Gardner pointed out in his remarks that the establishment of the new hospital is the first step in what may possibly begin a new order in Danville, and he expressed the hope that similar advancements would mark the future of the city. Dr. E. E. Barksdale, chairman of the board, also made appropriate remarks.

The complicated procedure of bringing the proposed plan for the erection of the hospital into a reality was outlined jointly by Councilmen D. W. Swicegood and P. F. Conway. Dr. R. W. Garnett, city health officer, was also among the speakers, declaring that the new plant should prove highly beneficial in bettering health conditions among members of the Negro race in Danville.

Owens, and the Rev. A. W. Jones, while the benediction was pro-



nounced by Dr. James M. Shelburne.  
Dr. J. L. Harris, a member of the  
Danville, Va., Register  
November 29, 1940

## WINSLOW HOSPITAL FORMALLY OPENED

Dedication Exercises Attended  
By Many Notables of White  
And Negro Races

Dedication exercises were conducted yesterday at Winslow Hospital, recently completed Negro institution in Almagro, with some 500 persons, including Mayor W. E. Gardner and other city officials, attending the ceremony.

Leaders of both races congregated in the sun parlor of the hospital and paid tribute to the man for whom the institution was named, the late Dr. Albert L. Winslow.

The principal guest speaker, J. O. Carter, colored attorney, gave voice to appreciation felt by members of his race for the cooperative efforts of the city in founding the hospital. The new building replaces Providence Hospital, the antiquated structure located at the corner of South Main and W. Paxton Streets.

The establishment of the new struc-

ture is the answer to a long-cherished hope of the Negro race in Danville, the Rev. G. W. Goode stated in reviewing the 21-year history of Providence Hospital.

The entire staff of Providence Hospital has been retained and one new addition has been made to the corps of attendants.

Mayor Gardner pointed out that the establishment is the first step in what may possibly begin a new order in Danville and he expressed the hope that similar advancements would materialize in the future.

The complicated procedure of bringing the proposed plan for the erection of the hospital into a reality was outlined jointly by Councilmen D. W. Swicegood and P. F. Conway. Dr. R. W. Garnett, city health officer, was also among the speakers, declaring that the new plant should prove highly beneficial in bettering health conditions among members of the Negro race in Danville.

The ceremonies were opened with a rendition by the choral group of the John M. Langston High School Glee Club and the entire group was heard in several selections throughout the proceedings. Scripture readings were offered by the Rev. C. H. Owens and the Rev. A. W. Jones and the benediction by Dr. James M. Shelburne.

Dr. E. E. Barksdale, chairman of the board, spoke briefly on the opening of the new institution and the ceremonies were presided over by Dr. J. L. Harris, a member of the house committee, following which the assemblage was escorted on a general tour of inspection of the entire plant. The establishment was decorated throughout with flowers.

Roanoke, Va., World News  
January 24, 1940

## Etta Moten Will Sing Here In Hale's Infirmary Benefit

Etta Moten, celebrated negro contralto, will appear at the City Auditorium here on the evening of Feb. 11, in a performance whose proceeds will go to the support of Hale Infirmary, declared the only negro institution in the city operated only by charity. Trustees of the infirmary said they had secured the services of the artist at great risk as a method of raising much-needed funds. For this reason it was hoped that the auditorium would be filled to capacity on the night of the concert.

Officials at State Teachers College, co-sponsor of the concert, announced that the singer had been selected after much thought as one of the most popular and versatile of the concert, radio and film world. An apt interpreter of such widely varied material as spirituals, classics in foreign languages, operatic arias and popular request numbers, Etta Moten has been acclaimed "the Brown Thrush of Song," "one of the foremost concert artists of our day," "an ecstatically beautiful and sensational contralto" by leading critics in the musical field.

The singer has been praised for "the natural gift of song, combined with marvelous control, intense training, and a perfect approach to the type of number being sung."

Because of the artist's ability in all fields, indications are that not only lovers of classical music but those whose tastes are centered mainly around popular songs, will find Etta Moten's performance highly entertaining. The singer will intersperse her program with informative talks explaining the origins and original settings of songs prior to her interpretation of them. Her program, it was announced, would be typical, turning from the difficult enunciations of classical numbers to the lighter strains of the popular ballad and the negro spiritual.

A resident of Chicago, Etta Moten has gained fame as a radio singer and as the original "Carioca Girl" in the film "Flying Down to Rio."

Tickets will be on sale at Jesse French, and at Pitts, Nicholson and Dean's Drug Stores.

## Co-Founder Of Whittaker Hospital

### Practiced In Newport News For 40 Years

Staff Correspondence

NEWPORT NEWS, Va.—News of the death of Dr. W. T. Jones, one of two pioneer physicians associated with the early development of medical practice on the Virginia Peninsula, reached his friends and former associates here Friday afternoon a few hours after he succumbed at the home of a daughter in Little Rock, Ark.

The deceased came to Newport News a little over 40 years ago, following the death of Dr. G. Lucas who was the first Negro physician to practice in this area. When the need for a Negro hospital became imperative, Dr. Jones joined with Dr. W. P. Dickerson and the late Dr. W. T. Foreman and Dr. D. A. Scott in organizing the Whittaker Memorial Hospital, 25 years ago. He served the staff as secretary for several years.

Dr. Jones received his medical degree from Western Reserve University in Cleveland, Ohio, and attended Washington and Jefferson College in Washington, Pa. Upon his retirement from active practice, he returned to his home in Washington, Pa.

Tributes to the deceased as a scholar, civic leader, and humanitarian were paid by Dr. W. P. Dickerson of the Whittaker Hospital staff; Prof. N. B. Clark, retired educator, at whose home Dr. Jones lived 40 years ago; and Attorney J. Thomas Newsome.

Funeral rites were held Tuesday in his native home in Pennsylvania attended by representation of the medical, dental, and pharmaceutical fraternities in the East and South. He is survived by two daughters and other relatives.

## Little Color Girl at TB Sanatorium



This little colored girl, Naomi Graveley, a patient at the municipal tuberculosis sanatorium at Coyner's Springs, is one of the first negro children in Roanoke for whom sanatorium facilities have been available. While some other municipal sanatoria have admitted colored children, no State facilities have been available heretofore, and small colored TB patients from Roanoke had to be cared for in their homes.

Naomi, who has an incipient case of the disease, is being given rest treatment at the municipal institution, where she is getting plenty of attention these days, and is apparently have the time of her life, judging from the toys that surround her. Her favorite pastime is clipping paper dolls.

On a recent visit here, Dr. E. C. Harper, director of the outpatient service of the State Health Department, announced that a new building to be opened at Piedmont, State tuberculosis sanatorium for negroes, would provide facilities for colored children.

One other negro child is a patient at the municipal sanatorium now.

# New \$95,000 Norfolk Result Of Struggle For

Institution One of Best-Equipped and Successful in  
Country — Was Erected Under Joint Grant and  
Helped Solve Serious Hospitalization Problem.

By TED POSTON  
(Staff Correspondent)

NORFOLK, Va., April 11—A quarter century fight for a modern institution where Negro doctors and nurses may practice their profession and Negro patients get the best of care has reached its culmination here in the new \$95,000 Norfolk Community hospital, one of the best-equipped and most successful institutions of its kind in the country.

Erected under a joint grant from the Public Works Administration and the City of Norfolk and equipped with the most modern facilities available, the hospital is a tribute to the persistence of the local medical profession in bucking seemingly insurmountable odds and to the wholehearted support which the Negro public gave them from the start.

## CAMPAIGN STARTED 25 YEARS AGO

The campaign for a Negro-staffed and operated hospital bore its first fruit 25 years ago this month when the Tidewater Colored Hospital Association was incorporated here to secure, equip and maintain an institution for the Negro medical profession and public.

Such a move was necessitated by the usual conditions in a southern city. Negro doctors were not allowed to treat their own patients in the city hospitals. Negro nurses, of course, could not practice their profession there. The city maintained only a minimum of beds for colored patients in local institutions and no city hospital would admit a Negro mother for normal childbirth and prenatal care. Negroes who could afford to pay the cost were not permitted private care in city hospitals.

Determined to remedy this condition, Norfolk's Negro doctors pooled their meager resources and formed the association. Formal operation of a Tidewater Colored hospital began on June 1, 1915, when Dr. Wilbur A. Drake, one of the original nine incorporators, turned over his large home at 1452

## SUCCESS FROM START

Supported by the public and operated by the doctors who founded it, the new hospital was a success from the start. The board of trustees was enlarged and reorganized after the death of Dr. Drake in 1930 and the name was changed to Drake Memorial hospital. The increasing responsibilities of the institution had already made acute the pressing need for enlarged facilities.

These needed facilities were obtained in 1932 after the Tidewater Colored Hospital Association, the Norfolk Medical, Dental and Pharmaceutical Society, the Colored Maternity Ward and the Henry Street branch of the Norfolk Health Department persuaded city officials to lease to the group for a nominal rental the vacated Henry A. Wise hospital (white) at 800 Rugby street.

The Drake Memorial hospital and the Community Maternity Ward then merged and began operation as the Norfolk Community hospital on October 5 of that year.

Housed in a once-condemned two-story frame building and still handicapped by the necessity of raising its own funds, the new hospital continued the success of the early years. No longer a private institution because of a small appropriation from the city (\$265 the first year), the institution increased its total receipts more than 350 per cent in five years, from \$5,088.93 in 1933 to \$18,907.68 in 1938. The city's contribution rose from \$265 the first year to \$3,400 in the period.

## PRESENT BLDG. DRIVE STARTED 2 YEARS AGO

Public support by way of membership fees is indicated by the

\$27 received in 1933 and \$7 in 1934 to the \$2,941.92 listed in 1938. The Woman's Auxiliary under the leadership of Miss Buena V. Kelley was credited with the increased public support. The drive from the present modern building got under way two years ago when the American Hospital Association refused to approve the old condemned Rugby street building. The PWA contribution, secured just a few days before Congress almost abolished that agency, was 45 per cent of the \$95,000.

The new building, containing 54 beds and 10 bassinets and three private rooms on its three floors, was formally dedicated on December 17 last year—just ten days after the first patient had been rushed there for an emergency childbirth. The baby was delivered in the operating room even before the obstetrical equipment had been set up. Twins were delivered there for another mother on January 1.

Rev. B. W. Harris, president of the hospital and chairman of the executive committee and trustee board, revealed to Courier representatives that the annual operating expenses of the hospital average \$30,000 a year. The Norfolk Community Fund contributes \$5,500 of this sum, the city \$4,100 and the rest comes from the fees of patients and unsolicited contributions. The vast majority of the hospital's patients are indigent and unable to pay for hospitalization.

## STAFF COMPOSED OF QUALIFIED DOCTORS

Dr. J. Q. A. Webb, who succeeded Dr. Drake at the old Tidewater hospital in 1930, is chief-of-staff; Dr. G. Hamilton Francis, assistant chief, and Dr. A. G. Fentress staff secretary. The medical staff is composed of the best qualified doctors in the community and outstanding white physicians and surgeons serve as consultants on special cases. The large courtesy staff is composed of physicians who enjoy the facilities of the hospital but reside in too distant communities to serve on the active list. There are 20 staff physicians and surgeons.

Miss Thelma M. Gibson, R. N., is superintendent of the hospital which has 22 paid employees, including 12 graduate nurses and three doctors. The National Youth Administration furnishes the institution with more than 20

nurses helpers and assistants. Miss Gibson, a graduate of the Kansas City General hospital who also took postgraduate work at the University of California hospital, came here in 1936 to serve as superintendent of the old Rugby street hospital. Miss Bernice Wynn is in charge of the operating room and Miss Josephine Demmons is supervisor of nurses.

The Community Hospital, under a separate corporation, also operates the City Beach for Negroes here. It was turned over by city officials at a dollar a year nominal rental in 1938 after several white promoters had failed in its operation. The hospital operates all major concessions at the beach located at Little Creek on Chesapeake Bay during a season beginning on May 30 and extending during Labor Day.

The institution has alert and active care in all branches of modern service—surgical, medical, obstetrical, pediatrics, x-ray, pathological, ear, eye, nose and throat, anesthetic, orthopedic and out-patient. More than 3,000 persons were examined and treated in the Out-Patient Department last year.